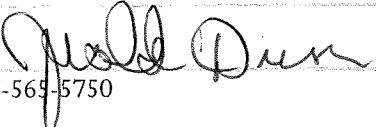


# California – Child and Family Services Review Signature Sheet

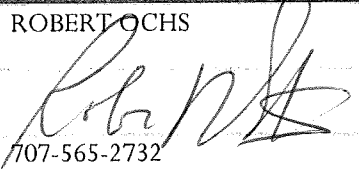
For submittal of: CSA ☐ SIP ☐ Progress Report ☒

County	SONOMA
SIP Period Dates	FEBRUARY 20, 2014-FEBRUARY 19, 2015
Outcome Data Period	Q3 2014

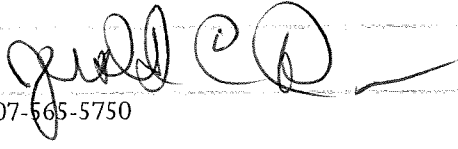
## County Child Welfare Agency Director

Name	JERALD DUNN
Signature*	
Phone Number	707-565-5750
Mailing Address	P.O. BOX 1539 SANTA ROSA, CA 95402

## County Chief Probation Officer

Name	ROBERT OCHS
Signature*	
Phone Number	707-565-2732
Mailing Address	600 ADMINISTRATION DRIVE ROOM 104J SANTA ROSA, CA 95403

## Public Agency Designated to Administer CAPIT and CBCAP

Name	JERALD DUNN
Signature*	
Phone Number	707-565-5750
Mailing Address	P.O. BOX 1539 SANTA ROSA, CA 95402

## Board of Supervisors (BOS) Signature

BOS Approval Date	N/A
Name	
Signature*	

Mail the original Signature Sheet to:

\*Signatures must be in blue ink

Children's Services Outcomes and Accountability Bureau  
Attention: Bureau Chief  
Children and Family Services Division  
California Department of Social Services  
744 P Street, MS 8-12-91  
Sacramento, CA 95814

## Contact Information

Child Welfare Agency	Name	KATIE GREAVES
	Agency	SONOMA COUNTY HUMAN SERVICES DEPARTMENT
	Phone & E-mail	707-565-4261, greavk@schsd.org
	Mailing Address	P.O. BOX 1539, SANTA ROSA CA 95402
Probation Agency	Name	LARISSA HEEREN
	Agency	PROBATION DEPARTMENT
	Phone & E-mail	707-565-6294, <a href="mailto:Larissa.heeren@sonoma-county.org">Larissa.heeren@sonoma-county.org</a>
	Mailing Address	7425 RANCHO LOS GUILICOS RD., SANTA ROSA 95409
Public Agency Administering CAPIT and CBCAP  (if other than Child Welfare)	Name	REGINA DE MELO
	Agency	SONOMA COUNTY HUMAN SERVICES DEPARTMENT
	Phone & E-mail	707-565-4346, rdemelo@schsd.org
	Mailing Address	P.O. BOX 1539, SANTA ROSA CA 95402
CAPIT Liaison	Name	REGINA DE MELO
	Agency	SONOMA COUNTY HUMAN SERVICES DEPARTMENT
	Phone & E-mail	707-565-4346, rdemelo@schsd.org
	Mailing Address	P.O. BOX 1539, SANTA ROSA CA 95402
CBCAP Liaison	Name	REGINA DE MELO
	Agency	SONOMA COUNTY HUMAN SERVICES DEPARTMENT
	Phone & E-mail	707-565-4346, rdemelo@schsd.org
	Mailing Address	P.O. BOX 1539, SANTA ROSA CA 95402
PSSF Liaison	Name	REGINA DE MELO
	Agency	SONOMA COUNTY HUMAN SERVICES DEPARTMENT
	Phone & E-mail	707-565-4346, rdemelo@schsd.org
	Mailing Address	P.O. BOX 1539, SANTA ROSA CA 95402

# California - Child and Family Services Review

## **Annual SIP Progress Report SONOMA COUNTY**

**FEBRUARY 20, 2014 – FEBRUARY 19, 2015**



COUNTY OF  
**SONOMA**



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## Introduction

Sonoma County's 5-year System Improvement Plan (SIP) was approved by the Sonoma County Board of Supervisors on February 11, 2014. Since that time, the Family, Youth & Children's Services (FYC) and the Probation Department (Probation) have been working to implement their respective SIP strategies. This is the first Annual System Improvement Plan Progress Report for Sonoma County and is submitted to the California Department of Social Services (CDSS) as a collaborative effort between FYC and Probation. The purpose of the Annual SIP Progress Report is to provide CDSS with a status update on the implementation of the strategic initiatives outlined in the 2014-2019 Sonoma County SIP. This report outlines the progress we have made during the first year and covers the time period February 20, 2014 through February 19, 2015.

To monitor the effectiveness of our strategic initiatives, we are using the Children and Families Services Review (CFSR) Performance Measures as reported by the California Child Welfare Indicators Project (CCWIP) quarterly data report. Throughout this report we reference quarterly outcome data from the CCWIP unless otherwise noted. Specifically, we are monitoring outcomes related to:

Category	Focus	CFSR Measure	CFSR Measure Number	SIP Target
SAFETY	Prevention of Child Abuse and Neglect	Recurrence of Maltreatment Substantiations and Entries to Foster Care	S1.1 PR	>94.6% "WATCH"*
PERMANENCY	Reunification	Reunification within 12 months (exit cohort) Re-entry following reunification	C1.1 C1.4	>70% "WATCH"
	Permanency for older youth	Exits to Permanency (24 months in care)	C3.1	>27%
	Develop/formalize a full continuum of placement options	Number of foster homes Percent of youth in group homes Percent of youth placed with relatives	N/A 4B (PIT)	+25 homes <8% >40%
	Reunification - PROBATION	Reunification within 12 months	C1.1	>40%
WELL-BEING	Youth authorized	Percent of youth authorized	5F	<19%

	for psychotropic medication	for psychotropic medication		
	Define and measure youth well-being	Youth Self-Sufficiency measures	8A	Qualitative
ORGANIZATIO NAL	Consistency of practice	Local measures	N/A	Qualitative
	Data collection and data entry	Timely Response (10-Day) Timely Caseworker Visits ICWA Eligible Placement Status Individualized Education Plans	2B 2C/2F 4E 6B	>90% >90% Qualitative Qualitative
* WATCH pertains to an outcome or trend that FYC or Probation is actively monitoring but hasn't been determined to be an improvement area.				

## Child Welfare

Over the past year, FYC has focused on collaboration and expanding the reach of our programs to support additional children, youth and families. We have our sights set on:

- ❖ ***Increasing community awareness of and supportive services to prevent child abuse;***
- ❖ ***Maintaining (or reunifying) children with their parents;***
- ❖ ***Establishing permanency for older youth;***
- ❖ ***Decreasing the number of youth in group homes; and***
- ❖ ***Developing structures and processes for family and community engagement in decision making and case planning.***

While we have completed just one year of our ambitious five year plan, we believe we are making progress toward achieving our safety, permanency and well-being goals. In the year ahead, our focus will be on:

- developing additional community resources to transition youth to permanency
- developing the information infrastructure for data collection and analysis
- defining indicators of success towards our goals

Additionally, FYC and Probation entered into the IV-E Waiver in October 2014, which may affect the content, sequence and timing of the strategic initiative outlined in the Sonoma County 2014-2019 SIP.

## Probation

Over the past year, Probation has focused on aftercare. Youth, under the auspices of the Probation Department in Sonoma County, continue to benefit from the involvement of numerous partner agencies. In particular, Probation has worked closely with Seneca Family of Agencies, the contracted Wrap provider, on Wraparound services, historically a more

prevalent pre-placement option. Probation's participation in the Title IV-E waiver will allow for emphasis on increasing Wraparound services both pre and post placement. Given that post placement services can be critical to transition the youth back into a more stabilized environment, Wrap service providers are seen as a critical component to timely reunification. In a similar vein, Probation and FYC contract with Seneca for Family Finding to help facilitate reunification, a strategy that directly impacts key outcome measures. Probation has also actively increased engagement with families, which is seen as a cornerstone to introducing support services and transitional assessment for both parent/guardian and youth.

## SIP Progress Narrative

### **Stakeholders Participation**

Sonoma County has multiple channels for input and dialogue about the strategies included in the 2014-2019 System Improvement Plan. Following the numerous community meetings and focus groups to get input from a broad swath of stakeholders for the 2013 County Self Assessment and to develop the current SIP, FYC and Probation have elected to utilize smaller forums to elicit feedback and collaborate on SIP strategies. Included among these are:

- FYC monthly all-staff meetings
- FYC monthly managers' meeting
- FYC biweekly managers/supervisors meeting
- Weekly unit meetings
- Quarterly Indian Child Welfare Act Roundtable meetings
- Monthly meetings with Behavioral Health
- Monthly Juvenile Justice Coordinating Council
- Monthly Mid-Level (Managers) meeting of FYC, Probation, Behavioral Health, Education, Wrap provider
- Bi-monthly meetings with residential treatment providers, Behavioral Health and Education
- SDM/SOP Oversight Committee
- TEAM/TDM Steering Committee
- Bi-monthly meetings of FYC managers and foster parent representatives
- Monthly Child Abuse Prevention Council
- Quarterly meetings with contracted service providers
- Ad hoc meetings with key subject matter experts on specific SIP strategies, i.e. psychotropic medication
- Focus groups with youth

- Monthly meetings with foster family agencies
- Ad hoc meetings with Santa Rosa Junior College
- Monthly meetings with court and counsel
- Quarterly meetings of Quality Parenting Initiative

## CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

### **Priority Outcome Measure or Systemic Factor: No Recurrence of Maltreatment (Measure S1.1)**

**National Standard:** >94.6%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 90.9%.

**SIP Improvement Goal:** Increase rate to 94.6% or higher rate of no recurrence of maltreatment over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 96.3%.

**Analysis:** *This is an area of strength for Sonoma County. Current performance exceeds the national target.*

### **Priority Outcome Measure or Systemic Factor: Reunification within 12 months (entry cohort) (Measure C1.3)**

**National Standard:** >48.4%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 25%.

**SIP Improvement Goal:** Increase the rate of timely reunification to 48.4% within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 47.2%.

**Analysis:** *This is an area of strength for Sonoma County. Current performance is ~1 percentage point below the national target. It is nearly double what it was at the beginning of the SIP.*

### **Priority Outcome Measure or Systemic Factor: Re-entry following reunification (Measure C1.4)**

**National Standard:** <9.9%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 5.7%.

**SIP Improvement Goal:** Maintain 9.9% or lower rate of re-entry following reunification over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 2.1%.

**Analysis:** *This is an area of strength for Sonoma County. Current performance exceeds the national target.*



**Priority Outcome Measure or Systemic Factor: Exits to permanency (24 months in care) (Measure C3.1)**

**National Standard:** >29.1%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 25.9%.

**SIP Improvement Goal:** Increase to 27% the number of youth (already in care for 24 months or longer) who exit to reunification, guardianship and adoption within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 17.5%.

**Analysis:** *This is an area of weakness for Sonoma County. Current performance is below the national target and has decreased since the start of the SIP.*

**Priority Outcome Measure or Systemic Factor: Youth Authorized for Psychotropic Medication (Measure 5F)**

**National Standard:** N/A

**Performance at beginning of the SIP:** At the time the SIP was approved, the rate had declined after a three year peak averaging 24%. In Q3 2013 was 18.5%.

**SIP Improvement Goal:** Guarantee that only children who need psychotropic medication are authorized for them. (Target <19%)

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 20%.

**Analysis:** *This is an area of focus for Sonoma County. The current rate is lower than it was during 2010-2012 but has increased slightly since the start of the SIP.*

**Priority Outcome Measure or Systemic Factor: Least restrictive environment (PIT) (Measure 4B)**

**National Standard:** N/A

**Performance at beginning of the SIP:** In Q3 2013, the rate of relative placements was 27.1%. In Q3 2013, the rate of group home placements was 13.7%.

**SIP Improvement Goal:** Increase to 40% the number of children placed with relatives over 5 years. Decrease to 8% the number of children placed in group homes within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate of children placed with relatives was 22.6%. In Q3 2014, the quarter for which the most current data are available, the rate of children placed in group homes was 12.2%.

**Analysis:** *This is an area of weakness for Sonoma County. The proportion of children placed with relatives has decreased in the one year since the SIP was approved. The proportion of youth placed in group homes has decreased by nearly 2 percentage points but has not yet reached the local goal of 8%.*

**Systemic Factor: Recruitment and retention of foster homes (Systemic Factor)**

**National Standard:** N/A

**Performance at beginning of the SIP:** Sonoma County had 103 licensed foster homes, of which 55 were actively accepting children.

**SIP Improvement Goal:** Increase number of foster homes by 10 homes within 5 years. Increase by 15 homes the number of treatment foster homes over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the number of licensed foster homes was 91 of which 60 were active.

**Analysis:** *The number of foster or foster/adoptive homes has increased in the one year since the SIP started. This is an area of continued focus for FYC.*

**Systemic Factor: Quality Assurance (Measures 2B, 2F, 4E, 6B)**

**SIP Improvement Goal:** Complete, accurate client data. Youth, family and community are engaged in case planning and decision making. Consistent social work practice.

**Current Performance/Analysis:** FYC has implemented several programs that have as a cornerstone a family team meeting that includes family and community members on decisions related to placement and case planning. FYC is currently in the midst of training its entire social work staff on Safety Organized Practice. Unit Supervisors consistently use compliance data available through Safe Measures to track their staff's data entry and case management.

**Probation Performance**

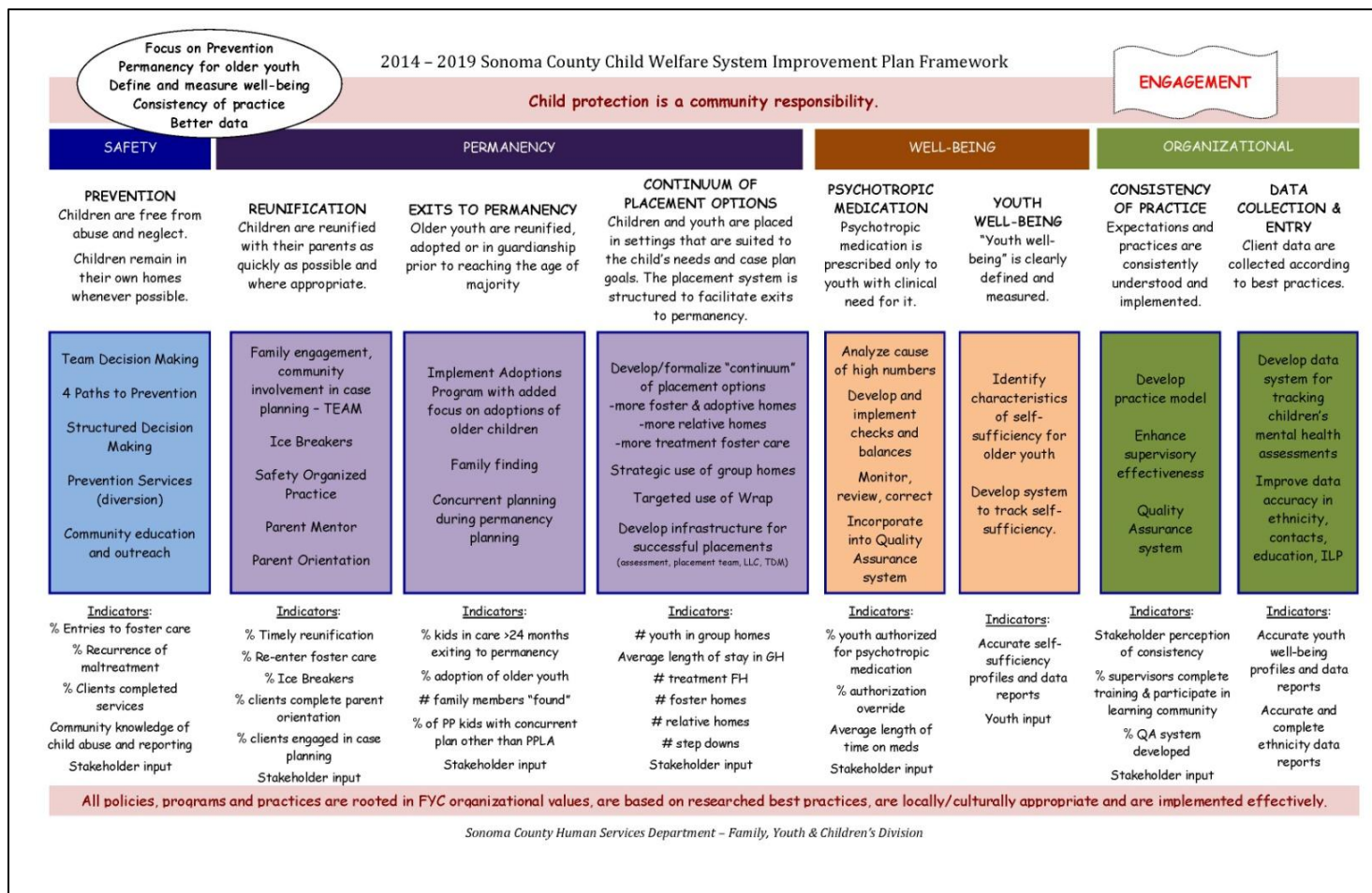
Probation chose measure C1.1, reunification within 12 months, because the majority of youth placed in foster care through delinquency proceedings return to the home upon program completion. The national standard/goal for reunification within 12 months is 75%. Baseline data (Q3 2012) indicated that only 25% of probation youth reunified within 12 months. Sonoma County Probation performance in Q3 2014 on measure C1.1 was 40% (6 of 15 youth reunified within 12 months).

Between 2008 and 2012, probation had an average reunification rate of 30% for this measure, as compared to a state average of 59% for the same period. Because this indicator varies greatly based on the small number of youth being tracked, Sonoma County Probation's goal is to increase our average rate of on this measure by 10% between 2013 and 2018.

Though current performance seems to indicate improvement in this measure, further analysis shows that outcomes in this area are declining as of Q2 2013. To date, progress has been made on implementing the SIP strategies so it is hoped that this trend will slow or reverse in the near future. It should be noted that there are many factors in probation cases which make it challenging to meet the National standard. Also, due to the small number of

probation youth who are in out-of-home placement at any given time, there is a great degree of variability by quarter in this measure.

<b>Q3-12</b>	<b>Q4-12</b>	<b>Q1-13</b>	<b>Q2-13</b>	<b>Q3-13</b>	<b>Q4-13</b>	<b>Q1-14</b>	<b>Q2-14</b>	<b>Q3-14</b>
25%	33.3%	38.7%	50%	46.7%	47.6%	47.1%	43.8%	40%



## STATUS OF STRATEGIES

### Child Welfare - Overview of 2014-2019 System Improvement Plan Strategies – Family, Youth & Children's Division

The child welfare strategies that comprise the 2014-2019 System Improvement Plan are categorized by their contribution to improvements to one or more of the SIP focus areas: *prevention, reunification, permanency for older youth, continuum of placement options, rate of youth on psychotropic medication, quality assurance*. The initiatives described below on pages 10-28 are individual SIP strategies grouped according to outcome or systems area as depicted in the SIP diagram above. Changes to individual strategies can be found in the SIP Table appended to this report.

## **Child Welfare Strategy Initiative 1: PREVENTION – Children are free from abuse and neglect. Children remain in their own homes whenever possible.**

### **Child Welfare Prevention Strategy 1: *Team Decision Making***

FYC implemented Team Decision Making in February 2012. In an effort to implement well, the department chose an incremental approach, for one placement-related decision, *At Risk of Imminent Placement*, and initially only for children ages 0-5 at risk of removal. The 2014-2019 SIP expanded the utilization of TDM for all children in the county at risk of removal. It will also expand the use of TDM to other placement decisions.

### **Child Welfare Prevention Strategy 2: *4 Paths to Prevention***

In 2013, FYC began a new initiative designed to integrate the different “levels” of pre-placement intervention into a purposeful matrix of prevention options based on a family’s level of risk, needs and willingness to participate in services. The 4 Paths to Prevention Program offers increasingly higher levels of department oversight from diversion (referrals to outside services, no case opened) to voluntary family maintenance, informal supervision (WIC 301) to court-ordered family maintenance. This new program added three new social workers in 2014. The 2014-2019 SIP includes action steps to support effective implementation of 4 Paths, such as finalizing and training staff on the policy and procedure, creating feedback loops and promoting full utilization of community-based diversion services.

### **Child Welfare Prevention Strategy 3: *Structured Decision Making***

FYC began using SDM in 2010 and uses all SDM assessment tools except the Substitute Care Provider Assessment Tool. We believe the use of SDM has contributed to our strong track record of preventing recurring abuse. In order to maintain and improve in this area, FYC will continue to focus on increasing the timely utilization of all the SDM tools in the 2014-2019 SIP. Action steps include regular compliance reporting to staff, enhanced remote access to SDM and progressive discipline.

### **Child Welfare Prevention Strategy 4, 6: *Community-Based Prevention Services***

The Human Services Department is the designated agency to administer child abuse prevention funds received through the Office of Child Abuse Prevention (OCAP). The HSD contracts with community-based service providers to offer a variety of prevention services including parent education, resource assistance, emergency family housing, counseling, case management and more. These services are available to families at no cost by referral from an Emergency Response social worker when an ongoing child welfare case is not opened. The 2014-2019 SIP outlines steps to ensure that services offered are evidence-based and accessible to families. It also creates a plan to monitor and increase families’ *engagement* in services.

### **Child Welfare Prevention Strategy 5: *Community Education and Outreach***

In 2014, the law changed to require schools to provide an annual training on mandated reporting to teachers and school staff. In January 2014, FYC hired a social worker whose sole responsibility is to ensure that the community is knowledgeable about how to identify and report suspected child abuse and neglect. Outreach to the community is done in partnership with the Child Abuse Prevention Council (Prevent Child Abuse Sonoma County). In addition to responding to requests for training, communities have been proactively and strategically selected for outreach based on analysis of needs using neighborhood-level data. The education campaign also includes content designed to arm the community with ideas about how to help struggling families who may be at risk of child abuse or neglect.

### **Analysis**

The strategies listed above are an illustration of the sum being greater than its parts. Together they are making a significant impact on the rate of recurrence of maltreatment in Sonoma County. In the most recent quarter for which data are available, only 3.7% children had a second incidence of child maltreatment within six months of a first one.

### **Action Step Status**

**The action steps that support the six prevention strategies are on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- Team Decision Making has been implemented for all children for whom there is an imminent risk of removal. Feedback loops to ensure adherence with the program model and policies/procedures have not been well developed. This will be focus in Year 2 of the SIP. Additionally, attention is now turned to expanding TDM to other placement changes.
- 4 Paths to Prevention is fully implemented although feedback loops to ensure consistent utilization of the decision trees have not been well developed.
- SDM remains a focus for FYC, in particular timely completion of the tools. Reporting on compliance is consistently provided to all units and to the SDM Oversight Committee. Rates of timely utilization of SDM tools continue to be consistently lower than the 90% target although they have improved in the first year of the 2014-2019 SIP. Ongoing training on the various tools, notably the FSNA, has been delayed due to the anticipated revision of the FSNA tool to be released in March 2015.
- Funding provided through the Office of Child Abuse Prevention (OCAP) for Promoting Safe and Stable Families (PSSF), Child Abuse Prevention, Intervention & Treatment (CAPIT) and Community Based Child Abuse Prevention (CBCAP) is



passed on to various community organizations to provide prevention services to families who are diverted from the child welfare system. In 2014, nearly all of these contracted service providers had to establish waiting lists due to the demand for services. In 2015, FYC will be adding additional funding to allow for additional families to be served. SIP strategies related to family engagement in prevention services is a priority focus for the analyst liaison for these contractors. The remaining action steps for the two strategies involving OCAP-funded services are on track to begin in 2015.

- Community outreach and education, including training of mandated reporters, has surpassed expectations for Year 1 of the SIP. There were 95 community trainings/presentations in 2014, more than doubling the number of trainings conducted in 2013. Due to staffing changes in the department, the action steps to coordinate the various outreach and training activities have been postponed to 2015.

### **Method of evaluation and/or Monitoring**

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum. Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes. Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes. For example:

- The CWS Outcomes Report provided by UC Berkeley every quarter is reviewed by managers each quarter for changes in the local rate of recurrence of maltreatment which is the overarching outcome measure associated with the Prevention strategies.
- TDM data are tracked via Efforts to Outcomes. Data are routinely reviewed on number of meetings, numbers and types of meeting participants and meeting outcomes, i.e. did child remain in home.
- SDM data are available organization-wide through Safe Measures. Supervisors have been trained in accessing custom reports that track compliance and outcome data for their staff on the various SDM tools.
- Community outreach presentations and trainings are tracked in a locally created Excel spreadsheet. Data are reviewed each month with monthly totals recorded in a master report called Trendex.

### **Additional strategies (when applicable)**

Sonoma County entered the California Well-Being Project (aka IV-E Waiver) in October 2014. As a condition of participation, FYC has begun to train staff in Safety Organized Practice (SOP). SOP was already included in the 2014-2019 SIP as a reunification strategy. The waiver creates the opportunity to use SOP more comprehensively across all programs as a strategy to engage parents in their own safety planning. Attached to SOP and supported with funding and flexibility offered by the waiver, FYC is poised to enhance its service array as a strategy to bolster community-based child abuse prevention. An example of an additional service to be provided is free legal counsel to kinship families.

### **Program Reduction**

N/A

## **Child Welfare Strategy Initiative 2: REUNIFICATION – Children are reunified with their parents and where appropriate.**

### **Child Welfare Reunification Strategy 1: *Together to Engage, Act and Motivate (TEAM)***

Sonoma County developed and launched a new program in July 2013 called TEAM. The purpose of the program is engage the family, youth, service providers and family-identified supports in developing the initial and ongoing child welfare case plans for families of youth (and the youth themselves) and initially targeted cases in which youth are in out-of-home placement. The program added three new social workers responsible for facilitating multi-disciplinary team meetings; they do not carry caseloads. The 2014-2019 SIP supports a strong implementation of this program and calls for expansion, over time, of its reach to families whose children remain home with court-ordered family maintenance.

### **Child Welfare Reunification Strategy 2: *Safety Organized Practice***

In light of two predominant themes of the 2013 County Self-Assessment process, family engagement and consistency of practice, and in acknowledgment of the growing use of SOP across the state, Sonoma County included Safety Organized Practice as a SIP strategy to support the reunification process. The 2014-2019 SIP calls for staff training on SOP. The initial areas of focus in the SIP for SOP were family interviewing and effective case plans.

### **Child Welfare Reunification Strategy 3: *Ice-Breaker Meetings***

Sonoma County Human Services Department has been holding Ice Breaker meetings since 2009. A best practice recommended by the Quality Parenting Initiative (QPI), Ice Breaker meetings are intended to provide an opportunity for birth parents, foster parents and social workers to create a sense of partnership on behalf of the “shared” child at the start of a placement in a foster home. In addition to sharing valuable information about the unique temperament and needs of the child, ice breaker meetings can also “break the ice” between



birth and foster parents, paving the way for positive ongoing communication and support to the birth parents as they overcome their parenting challenges. The 2014-2019 SIP creates accountability for the completion of ice breaker meetings and devotes a portion of a social worker to support the program.

#### **Child Welfare Reunification Strategy 4: *Parent Partner Program***

The Human Services Department has had a fledgling Parent Mentor program since 2008. Due to a lack of resources to bring the program to scale, the parent mentor program has not developed beyond a pilot status involving one volunteer parent mentor. The program has been designed and administratively prepared for implementation. The 2014-2019 SIP holds this program in reserve with a flag for priority implementation once resources are identified, such as grants or additional child welfare funding. The purpose of the parent mentor program is to provide a peer mentor to parents receiving family reunification services.

#### **Child Welfare Reunification Strategy 5: *Parent Orientation Program***

Parents whose children have been removed are often unclear about the court process and what reunification entails. In response to the need to provide more information, Sonoma County Human Services Department developed a business plan for a parent orientation program that provides 4 sessions to parents immediately after their children have been removed. The program has been designed and is ready for a competitive procurement process. The 2014-2019 SIP holds this program in reserve with a flag for priority implementation once resources are identified, such as grants or additional child welfare funding.

### **Analysis**

Sonoma County Human Services will be utilizing the entry cohort reunification measure (C1.3) for the remainder of the 2014-2019 SIP. According to the lead researchers at UC Berkeley who manage the outcome data, the entry cohort measure of timely reunification is a more accurate measure of timeliness of reunification and of permanency outcomes in general. At the time the 2014-2019 SIP was created, Sonoma County's rate of timely reunification (C1.3) was 25%, lower than the national target, 48.4%. In the most recent quarter for which data are available, Sonoma County's rate had risen to 47.2%. This means that 47.2% of all children who entered foster care between April 1, 2013 and September 30, 2013 had reunified with their parents within 12 months of removal. Additionally, a second reunification outcome measure looking at the rate of children re-entering foster after reunifying with their parents provides validation that the quality of reunification is good and the children are not returning to foster care. In Q3 2014, the most recent quarter with performance data, the re-entry rate for Sonoma County children was 2.1%, which is far below the state rate (12.4%).

## Action Step Status

**The action steps that support the five reunification strategies are on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- The TEAM program has been effectively running for well over a year. The action steps to expand TEAM to voluntary family maintenance, informal supervision and permanency planning have been completed, all in advance of the timeframe stipulated in the SIP. Furthermore, a Steering Committee has been convened to provide leadership and program development support to TEAM and TDM. Focus is now on creating a strong organizational structure for TEAM to support effective ongoing implementation. The Steering Committee has convened several workgroups to plan for and carry out adjunctive components of the TEAM program such as expansion, outreach, supporting social workers and evaluation.
- As mentioned above, Safety Organized Practice (SOP) has taken on added significance due to Sonoma County's participation in the California Well-Being Project (IV-E Waiver). Rather than utilizing SOP for the primary purpose of family reunification, FYC has begun to train all social workers in SOP with the vision of integrating SOP into all child welfare cases from the hotline to adoptions. Therefore, FYC has nearly finished the intensive training series for the first of three cohorts of social workers, supervisors and managers. An SOP Implementation Committee has been convened to assess and promote readiness for SOP and to plan for the eventual implementation of SOP when training is completed. The specific action steps associated with this strategy are revised in the SIP Table appended to this report.
- The Ice-Breaker strategy is variously in effect and on hold. FYC devoted a social worker to Ice-Breakers right at the time of the detention hearing. As a result of this dedicated position, ice breaker meetings at the first placement have been consistently held. Ice breaker meetings have not been consistently held, however, for placement changes that take place. The other action steps that comprise this strategy are off track and have revised timeframes noted in the SIP Table appended to this report.
- Both the Parent Partner and Parent Orientation strategies are ahead of schedule and are being prepared for procurement. Depending upon funding and a successful procurement process, both programs are anticipated to begin no later than January 2016.

## Method of evaluation and/or Monitoring

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum.

Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes. Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes. For example:

- The CWS Outcomes Report provided by UC Berkeley every quarter is reviewed by managers each quarter for changes in the local rates of timely reunification and re-entry following reunification which are the overarching outcome measures associated with the Reunification strategies.
- TEAM program data is tracked and reported on through a locally created Excel spreadsheet.
- SOP data have yet to be mapped to practice. For now, FYC is tracking social worker training by individual module. Additionally, FYC is communicating and coordinating with other waiver counties on the program elements to be tracked and the processes to collect data and evaluate outcomes.

#### **Additional strategies (when applicable)**

Attached to SOP and supported with funding and flexibility offered by the waiver, FYC is poised to enhance its service array as a strategy to bolster reunification services. An example of an additional service to be provided is emergency housing support to families going through reunification.

#### **Program Reduction**

N/A

### **Child Welfare Strategy Initiative 3: EXITS TO PERMANENCY – Older youth are reunified, adopted or in guardianship prior to reaching adulthood.**

#### **Child Welfare Permanency Strategy 1: *Focus on Adoptions of Older Youth***

Effective July 1, 2013 Sonoma County assumed responsibility for all aspects of public adoption services for Sonoma County dependent youth. For the last five years, Sonoma County has observed excellent outcomes for young children who are adopted. Children under age six make up the majority of children who are adopted in Sonoma County and they are adopted within the timeframes required by law. Older children, on the other hand, are not adopted as often or as quickly. The 2014-2019 SIP uses the adoptions program as a strategy to improve permanency outcomes for older youth with action steps such as child-specific recruitments and concurrent planning after family reunification services are terminated to birth parents.

## **Child Welfare Permanency Strategy 2: *Family Finding***

A child welfare “case” can cover a great distance during its long journey from Emergency Response to Adoptions Services. As such, a case is managed by many individuals over its lifespan. A natural byproduct of this mobility is the diffusion of information over time. Family finding is an excellent illustration of this: family information is most readily available at the case outset when parents and other kin are actively interested and involved and yet family information may not be *needed* until much later when the case is managed by a different social worker. The 2014-2019 SIP puts the spotlight on family finding and documentation in myriad ways at multiple junctures over the life of a case.

### **Analysis**

The strategies listed above attempt to shift the infrastructure in favor of permanency for youth in long-term foster care. They have proven more challenging to accomplish than anticipated, reflected in a decline in the rate of youth exiting to permanency in Sonoma County. In the most recent quarter for which data are available, only 17.5% of children who had been in foster care for 24 months or longer exited to permanency. This is a drop of 8 percentage points from the start of the SIP and nearly 12 percent lower than the national target of 29.1%. FYC maintains a firm belief that these strategies are essential to move the needle on this outcome and is analyzing ways to improve its implementation and support of these strategies moving forward.

### **Action Step Status**

**The action steps that support the two permanency strategies are partially on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- Sonoma County’s adoption services have been up and running since July 2013. In that time, FYC has completed several adoptions for older youth and youth predominantly placed in residential treatment. These accomplishments have been as a result of child-specific recruitments done at the local and statewide level. A specific pro-adoption campaign directed at youth is slated to begin in July 2015, in accordance with the 2014-2019 SIP timeframe.
- FYC has not had as much progress as anticipated at carrying out the procedural and philosophical action steps to systematically review cases of youth in long-term foster care, those of children over the age of 6 who are not in concurrent homes and of the feasibility/preference of looking out of county if local options are unavailable. Further, FYC will delay its development of a practice model in lieu of the statewide Core Practice Model which has not been rolled out to county staff yet. A practice model will assist FYC in sorting through the philosophical tension between concurrent planning and family reunification especially as it pertains to potential

concurrent placement homes located outside of Sonoma County. This ambiguity has contributed to longer lengths of stay in foster care.

- In response to new regulation limiting lengths of stay in residential treatment, FYC has created and implemented an oversight committee, the Placement Assessment Resource Committee (PARC), to review all requests for residential treatment and to review all youth who are nearing or who have exceeded the regulatory time limits per ACLs 13-86 and 13-87. Additionally, FYC has collaborated with a number of local residential treatment providers in creating a purposeful assessment, treatment and discharge process for youth in residential treatment with an overarching goal of providing short-term, targeted and effective treatment to youth geared toward transitioning them back into the community. As a result, Sonoma County's rate of youth in group homes has decreased by nearly 2 percentage points.
- In early 2014, FYC and Probation expanded the contract with a community provider to do family finding and permanency support work for three times (n=36) the number of children covered under the previous contract (n=12). The pace of children referred for family finding services has been slow; FYC and the contractor are problem-solving barriers to referral and communication channels to the social workers working with youth in group homes and in long-term foster care. The specific action steps associated with this strategy are revised in the SIP Table appended to this report.
- FYC has a social worker position dedicated to meeting with family at the detention hearing to collect as much family information as possible.

### **Method of evaluation and/or Monitoring**

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum. Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes. Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes. For example:

- The CWS Outcomes Report provided by UC Berkeley every quarter is reviewed by managers each quarter for change in the local rate of exits to permanency which is the overarching outcome measure associated with the Exits to Permanency strategies.

- PARC data are stored in a locally created Excel spreadsheet. Youth length of stay in group care is obtained from CWS/CMS via Business Objects and tracked on a monthly basis.
- Data on relatives and family found either by FYC social workers or the contracted provider are not routinely entered into CWS/CMS. Family and other potential connections identified by the Relative Support social worker are stored in a locally created Excel spreadsheet. The contractor for family finding and permanency services uses its own software to record information gathered which is transmitted to FYC social workers via a written report.

#### **Additional strategies (when applicable)**

N/A

#### **Program Reduction**

N/A

### **Child Welfare Strategy Initiative 4: CONTINUUM OF PLACEMENT OPTIONS – Children and youth are placed in settings that suited to the child’s unique needs and case plan goals. The placement system is structured to facilitate exits to permanency.**

#### ***Child Welfare Placement Continuum Strategy 1: Recruit and retain more relative, foster, adoptive and treatment foster homes***

In order to ensure that a child is placed in the most appropriate setting, a social worker needs to have options from which to choose. There is a domino effect on permanency and well-being outcomes starting with a forced placement due to lack of options. The 2014-2019 SIP includes a redesigned outreach and recruitment strategy to build its cache of foster, adoptive and treatment foster homes. Further, the SIP creates a blueprint for more placements with relatives.

#### ***Child Welfare Placement Continuum Strategy 2: Develop and reinforce supportive services to substitute care providers***

Placements are more successful when substitute care providers have adequate support including support during times of transition to a new placement. The 2014-2019 System Improvement Plan acknowledges that recruitment alone cannot solve the problem of placement options; retention of substitute care providers is another essential building block to successful placements and ultimately permanency. Retention strategies include dedicated and enhanced support to relative and foster homes, increased education and training, and coordinated/timely services to children and caregivers at the time of placement.

### **Child Welfare Placement Continuum Strategy 3: *Improve assessment process to support permanency-oriented placement.***

The third essential piece of the placement infrastructure is the assessment process completed by social workers to determine an ideal placement. In Sonoma County, there are multiple players involved in the assessment process including Sonoma County Behavioral Health, Valley of the Moon Children's Home, placement specialists and case carrying social workers. The 2014-2019 SIP aligns the sequence of events that make up the assessment process and coordinates the various participants in the placement process with the intent to make timely, permanency-oriented placements.

### **Child Welfare Placement Continuum Strategy 4: *Formalize placement system into a "continuum of care"***

As in most complex systems, the individual components that comprise the system often exist in silos, uncoordinated and potentially at odds with one another. The strategies that have been described thus far for this SIP focus area are "building blocks"; in order to achieve the full collective impact, each strategy must be coordinated with the other strategies. To that end, the 2014-2019 SIP includes additional strategies to ensure coordination by institutionalizing the recruitment, retention and support activities into one seamless continuum of care. Included among them are the strategic use of group homes and wraparound, integrating family finding into the placement system and expanding Team Decision Making to placement changes.

### **Analysis**

The strategies included in the Continuum of Placement Options strategic initiative are the most ambitious and potentially the most impactful of any in the 2014-2019 SIP. This array of strategies places substitute care providers at center stage and aims to create a collaborative and coordinated support system around them to promote the most opportunity for children to exit temporary foster care. These strategies, if successfully carried out, are the backbone of a principled and effective foster care system. They are entirely systemic in nature and have therefore no direct child outcome measures linked to them.

### **Action Step Status**

**The action steps that support the four continuum strategies are partially on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- FYC has a dedicated social worker to interview parents at the detention hearing to collect family and extended family information for future placement options. The policy and procedure for emergency relative placements is nearly final. FYC is



analyzing staffing options to be able to do emergency relative placements; this and the smooth implementation of the procedure will be foci in Year 2 of the SIP. Quality improvement continues to be a need for training options available to relative and extended family caregivers as well as prospective foster parents at the Santa Rosa Junior College. The 2015-2016 budget includes a position dedicated to support relative caregivers caring for dependent children. Additionally, in the 2015-2016 budget, additional funds have been approved for child care and for the KSSP contractor supporting caregivers. Specific action steps associated with supporting relative caregivers are revised in the SIP Table appended to this report.

- The Quality Parenting Initiative continues to build momentum and create a strong sense of partnership between social workers and foster parents. Sonoma County sent a contingent of ten to the statewide conference in January 2015.
- The actions steps associated with targeted recruitment for foster/adoptive homes for Latino and African American children as well as older children and sibling groups have been postponed. They have been revised in the SIP Table appended to this report.
- FYC and Probation share 72 Wrap slots for child welfare and probation youth to transition from residential treatment into family settings. Priority enrollment is for kids who need to step down from residential treatment although with 72 slots there is no waiting list for Wrap slots.
- Since the start of the 2014-2019 SIP, FYC has executed 3 new agreements with foster family agencies for intensive treatment foster care. FYC is slightly behind the SIP timeline in carrying out several of the action steps related to expanding treatment foster care. This will be a focus during Year 2 of the SIP. The specific action steps associated with this strategy are revised in the SIP Table appended to this report.
- SIP action steps in support of emergency foster homes have been postponed. They have been revised in the SIP Table appended to this report.
- FYC managers attended training for the Child and Adolescent Needs Assessment (CANS) in January 2014. The rollout of the CANS screening by social workers has been postponed as a consequence of participation in the IV-Waiver Project which is prioritizing SOP training and implementation. New timeframes for CANS implementation reflected in the SIP Table appended to this report. The revised timeframe aligns with the CANS timeframe in Sonoma County's approved IV-E Waiver Plan.
- Assessment of children placed at Valley of the Moon Children's Home is comprehensive and multi-dimensional. Behavioral Health clinicians conduct CANS screenings and/or assessments, direct care staff assess milieu needs and other professionals from medical, dental and educational fields assess their respective areas. Weekly multi-disciplinary meetings are held for the children residing at



VMCH, facilitated by a social worker whose primary responsibility is to coordinate children's transition from VMCH to a setting that will meet their needs. A new database for tracking and communicating care of children at VMCH, MyEvolv, will be rolled out in June 2015. Revised timeframes are included in the SIP Table appended to this report.

- Needs assessment of substitute caregivers continues to be done informally without the use of a standard tool or process. The timeline to implement a common assessment process for substitute caregivers has been revised in the SIP Table appended to this report.
- FYC created a dedicated placement unit comprised of social workers who do not carry cases and are therefore freed up to focus exclusively on finding optimum placements for children from the moment they enter foster care and throughout the life of the case.
- FYC has collaborated with a number of local residential treatment providers in creating a purposeful assessment, treatment and discharge process for youth in residential treatment with an overarching goal of providing short-term, targeted and effective treatment to youth geared toward transitioning them back into the community.
- The SIP calls for expansion of team decision making meetings to all placement changes. While this remains a priority and is currently in progress, the actions steps to support this have been delayed. Children placed at Valley of the Moon Children's Home have been prioritized for TDMs; that phase of expansion will go live on March 1, 2015. What this means is starting March 1<sup>st</sup>, children who are removed and placed at VMCH without a viable plan to transition them to a community setting within 60 days will have placement TDMs scheduled at 25 and 45 days of admit to VMCH. Additional changes to the timeframe for placement change TDMs are reflected in the SIP Table appended to this report.

### **Method of evaluation and/or Monitoring**

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum. Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes.

Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes.

For example:

- Data on utilization and outcomes of Wraparound are collected, tracked and reported on by the local Wrap provider, Seneca. Reports are created at the individual level for coordination and monitoring by the case carrying social worker. They are also created at the program level for ongoing quality assurance and quality improvement.

#### **Additional strategies (when applicable)**

Sonoma County is poised to implement the Approved Relative Caregiver Funding program. FYC submitted a letter of intent to participate and provided baseline caseload numbers to CDSS.

#### **Program Reduction**

N/A

### **Child Welfare Strategy Initiative 5: PSYCHOTROPIC MEDICATION (YOUTH WELL-BEING) –Psychotropic medication is prescribed only to youth with a clinical need for it.**

#### **Child Welfare Psychotropic Medication Strategy: *Understand the problem and create a response to solve it.***

Sonoma County dependent youth are prescribed psychotropic medication at a rate nearly double the state rate. FYC uses the 2014-2019 System Improvement Plan to understand the causes of the high rate and to develop processes to ensure checks and balances and to provide ongoing monitoring at the individual and aggregate levels. These processes, when established, will be integrated into the department's quality assurance system.

#### **Analysis**

FYC has made this a top priority for Year 1 of the 2014-2019 SIP. While the rate of youth authorized for psychotropic medication remains relatively flat since the writing of the SIP, it is a positive result that it remains lower at 20% than it was during its peak years (2010-2012) when it averaged 24%. The action steps called for in the SIP may or may not affect the rate; it will, however, create additional checks and balances to be able to confidently say that only the youth who really need psychotropic medication are authorized for it.

#### **Action Step Status**

**The action steps that support the psychotropic medication strategies are partially on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- A Supplemental Information form has been created and sent to all commonly used residential treatment facilities and FFAs - it requires the group home or FFA staff to

submit more information with each JV-220 application - addressing primarily other ways behaviors/mental health concerns are being addressed in addition to meds and insuring that someone has had conversation with youth about the meds they are taking and why...that the youth understands why.

- Psychotropic medications are now a standing agenda item at all TEAM meetings if applicable.
- All JV-220 applications are now being screened by supervisors before submission to court.
- An initial training is scheduled in April 2015 (general in nature) to start the process of training FY&C staff and partners on psychotropic meds and approved uses, conversing with physicians about medications, and conversing with youth about medications.
- Funding has been approved in 2014-2015 and 2015-2016 for a psychiatrist to provide second opinions on the need for psychotropic medication. FYC is in conversation with Behavioral Health about contracting for pediatric psychiatrist hours for review of JV-220 applications and consultation.
- Additional changes to the timeframe for psychotropic medications are reflected in the SIP Table appended to this report.

### **Method of evaluation and/or Monitoring**

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum. Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes. Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes.

For the strategies related to psychotropic medication, the assigned manager has a direct role in coordinating all of the action steps listed in the SIP. He is tracking progress and provides regular reports to the division director on the status.

### **Additional strategies (when applicable)**

N/A

### **Program Reduction**

N/A

**Child Welfare Strategy Initiative 6: YOUTH SELF-SUFFICIENCY – Youth well-being (during foster care and after) are clearly defined and measured.**

**Child Welfare Youth Self Sufficiency Strategy:** *Establish indicators of well-being and create structure for data collection and measurement.*

Sonoma County dependent youth who do not reunify or move into guardianship or adoptive homes by the time they reach adulthood will ultimately “age out” of foster care sometime between the age of 18 and 21. Sonoma County has little data about how youth who age out of foster care are doing – emotionally, socio-economically, educationally, health-wise – when they leave the foster care system. The 2014-2019 SIP includes strategies to build the community’s knowledge about how Sonoma County foster youth fare when they transition out of the dependency system. These data will be used to inform practice with youth prior to the age of transition.

**Analysis**

These strategies are not slated to begin until Year 2 of the SIP.

**Action Step Status**

These strategies are not slated to begin until Year 2 of the SIP.

**Method of evaluation and/or Monitoring**

These strategies are not slated to begin until Year 2 of the SIP.

**Additional strategies (when applicable)**

N/A

**Program Reduction**

N/A

**Child Welfare Strategy Initiative 7: QUALITY ASSURANCE – Expectations of social work practice are consistently understood and implemented. Client data are collected in accordance with best practices.**

**Child Welfare Quality Assurance Strategies:** *Develop and implement structures and processes to promote consistent and high quality service delivery such as core practice model, case review system, supervisory training and timely/accurate data processes/systems.*

Quality assurance is defined in the 2014-2019 SIP as the framework for promoting consistent social work practice and accurate documentation of client demographics and client services. SIP strategies related to quality assurance are to develop and implement a core practice model, enhancing supervisory effectiveness, improving timeliness of face to face contacts and improving the accuracy of key data in CWS/CMS. The measures listed below are included in the 2014-2019 System Improvement Plan because they have been identified as lacking in either data or data validity. Therefore, the strategies included in the 2014-2019 SIP are intended to enhance the internal processes for data collection and reporting.

**Measure 2B** – This measure calculates the percent of cases in which face-to-face contact with a child occurs, or is attempted, within the regulatory time frames (10-day response).

**Measure 2F** – This measure calculates the percent of children in placement where face-to-face contact with a child occurs, or is attempted, each month.

**Measure 4E** – This measure reports the placement status of Indian Child Welfare Act eligible children.

**Measure 6B** – This measure reports the percent of children in out-of-home placement who have ever had an Individualized Education Plan (IEP).

## Analysis

The family of strategies that comprise the quality assurance strategic initiative is centered on organizational change and improvements. The strategies revolve around the premises that:

- day to day client services should be rooted in a commonly understood practice model framework
- outcomes for families should be independent of which social worker is assigned
- expectations for social work practice should be consistent across social work units
- child safety is improved with timely response AND with timely data entry
- communication of client outcomes is impacted by the quality and timeliness of data entry

The quality assurance strategies included in the SIP are mostly qualitative and are therefore not linked to CFSR outcome measures. The process measures 2B (timely response, 10-Day) and 2F (monthly face to face contact) have quantitative measures and state targets. In Year 1 of the 2014-2019 SIP, FYC has made good progress in making timely contact with children in 10-Day investigations (2B). In the quarter for which the most recent data are available, Sonoma County surpassed the state target of 90% with a rate of 91%. In monthly face-to-face contacts (Measure 2F), Sonoma County continues to struggle with meeting the 90% target and achieved only 83.9%. Reporting of missing contacts is done monthly and provided to all supervisors and managers for monitoring.

The majority of missing contacts is held by a minority of social workers and is believed to be the result of delayed data entry rather than truly missing contacts.

### **Action Step Status**

**The action steps that support the quality assurance strategies are partially on track according to the content and timeframe stated in the 2014-2019 SIP. Please see the SIP Table appended to this report for changes to content and timeframes.**

- In 2014, FYC devoted its entire 2-Day offsite strategic planning sessions to dialogue about consistency of social work practice and a practice model framework. At the time, the draft theoretical framework for the state's core practice model had just been released. Since then, FYC has held several meetings to "practice" getting concrete with a practice model framework utilizing real-world scenarios in which multiple values appear to be in competition, i.e. concurrent planning/permanency and maintaining siblings together. As the state's core practice model has taken additional form, FYC has pushed pause on its own internal practice model development in order to align with the state practice model. To that end, FYC held several focus groups, one of staff and one of tribal representatives on the state practice model framework. FYC is now standing by for guidance from CalSWEC and CDSS on next steps. Revised timeframes are included in the SIP Table appended to this report.
- FYC holds bimonthly meetings of all managers and supervisors in which there is a permanent agenda item for topics to promote supervisory consistency and effectiveness. Examples of topics covered in this agenda item include how often and what to cover in a unit meeting, working with challenging staff, integrating compliance into supervision and there are many others.
- SDM case readings have not been implemented as anticipated in the SIP. They remain an important part of a quality assurance system and therefore revised timeframes are included in the SIP Table appended to this report.
- Random case reviews have been sporadically held with a main focus on creating a case review tool and process. To date, section managers have met several times and each has reviewed one randomly selected case. The primary purpose of the review has been to adapt a sample tools to meet QA needs. Very recently, CDSS has issued guidance around statewide expectations of counties related to case reviews presenting an opportunity for FYC to dovetail its case review development with that of the state.
- Data collection needs related to behavioral health services for children have been identified and a system to address those needs has also been put in place. Through several meetings with Behavioral Health, First 5 Sonoma County and the community provider who provides developmental screening to very young children,

Persimmony (provided by First 5) was selected as the tool to capture, communicate and report on children's screening and referral for behavioral health services.

- Reporting on Katie A required services is still a focus for FYC and ongoing dialogue will ensue into Year 2 of the SIP with Behavioral Health on how to most efficiently fulfill the shared reporting requirement.

### **Method of evaluation and/or Monitoring**

All strategies included in the 2014-2019 System Improvement Plan are assigned to a manager to take a leadership role in the implementation and monitoring of the action steps. Additionally, FYC has a program development manager who tracks overall progress of SIP strategies and supports each manager to ensure ongoing focus and momentum. Quarterly data reports (CWS Outcomes, Berkeley) are reviewed in conjunction with additional process and outcome data from Safe Measures and various other reporting systems to gauge the impact of the SIP strategies on child and family outcomes. Furthermore, the SIP is among the key tools used for annual budget development to ensure that funding is provided to enact SIP strategies according to their approved timeframes. For example:

- Reporting of missing contacts is done monthly and provided to all supervisors and managers for monitoring.
- An FYC program analyst works with a Behavioral Health quality assurance analyst to assemble the data required for the biannual Katie A report.

### **Additional strategies (when applicable)**

FYC is in the development stage of a data system, Apricot, that will be utilized in conjunction with CWS/CMS to track and report on contracted services provided to child welfare families. CWS/CMS is a valuable case management tool but does not have the functionality to track services provided by community providers. Apricot will be used to enhance communication between social workers and community service providers and allow FYC to better understand questions of service dosage and client outcomes.

### **Program Reduction**

N/A

### **PROBATION STRATEGY 1: Increase monthly contact with custodial and non-custodial parent/guardian for reunification cases.**

**ANALYSIS :** Family engagement is viewed as a key component to achieving timely family reunification. The Probation Department recognized that the placement caseload numbers were high and officers struggled to meet with parents/legal guardians as mandated. With the reduction in caseloads, officers are meeting with parents regularly face to face when reunification is the case plan goal, and entering these contacts into CWS/CMS.



**ACTION STEP STATUS :** The Probation Department, as outlined in Action Step 1A, hired an additional placement officer and caseloads are now averaging between 10-15 cases. Action step 1C has also been completed. The other actions steps revolve around assessing performance and addressing barriers.

**METHOD OF EVALUATION AND/OR MONITORING:** Accessing data from Safe Measures regarding parent contacts completed.

**ADDITIONAL STRATEGIES (WHEN APPLICABLE):** N/A

**PROGRAM REDUCTION:** N/A

**PROBATION STRATEGY 2: Create and implement a monthly parent education and support group.**

**ANALYSIS :** Probation is still in the early stages of discussion and investigation regarding implementing a monthly parent education and support group for placement cases. The Probation Department has contacted a neighboring county regarding a similar model used including their curriculum, cost allocated, and other details of the group. The County of Sonoma is exploring what the appropriate procurement process might be for this new service.

**ACTION STEP STATUS :** If a competitive bidding process is not required for procurement of this service, several action steps may be eliminated. If that is the case, it is anticipated groups would begin in November 2015, as outlined in the SIP chart (2D).

**METHOD OF EVALUATION AND/OR MONITORING:** Probation is still developing a process which to evaluate effectiveness; however, utilization of a parent survey may be implemented. The Child and Adolescent Needs and Strengths (CANS) assessment tool is also being considered as a viable option.

**ADDITIONAL STRATEGIES (WHEN APPLICABLE):** N/A

**PROGRAM REDUCTION:** N/A

**PROBATION STRATEGY 3: PO conducts assessment of youth/ family to determine level of readiness to transition home.**

**ANALYSIS:** The Probation Department recently became a Title IV-e waiver county and our focus is on increasing our Wrap around services both pre and post placement. We are hoping that with collaboration from our Wrap provider, transition services for the youth and family will begin approximately 90 days from the identified discharge date (Action Step D and E). This will create a more seamless transition for both the youth and family. Identified issues or concerns would be addressed during this 90 day transition where the group home provider and the Wrap team could collaborate and target barriers upon the youth's return home. It is noted our current Wrap provider uses the CANS assessment tool to determine strengths and needs of the family.

**ACTION STEP STATUS:** We have initiated Action Steps A and B, and have identified the CANS assessment tool as a viable option. We considered the PACT placement assessment;



however, given the cost and potential length of time to initiate, this was not seen as a feasible option at this juncture.

**METHOD OF EVALUATION AND/OR MONITORING:** Once Probation identifies an appropriate assessment tool and a determination is made on who will implement the service, a method of evaluation/monitoring will be devised (e.g. case audits, progress reports, and direct feedback from participating families).

**ADDITIONAL STRATEGIES (WHEN APPLICABLE):** N/A

**PROGRAM REDUCTION:** N/A

**PROBATION STRATEGY 4: Increase concurrent planning activities for placement youth.**

**ANALYSIS :** Placement officers have attended training on concurrent planning provided by UC Davis Extension and understand the importance of having a solid case plan goal in place. However, there are many factors that are unpredictable and having a parallel plan allows for reunification to occur in a timely manner. The Probation Department currently has a contract with Seneca Family of Agencies and offers family finding. Seneca has a Lifelong Connections Permanency Team which offers a wide variety of services with regards to family finding, building relationships and permanency. Probation sends a letter, along with an information pamphlet which is utilized for relatives to help in the process of identifying family members and establishing permanent connections. This process is initiated at the intake level and is followed throughout the life of the case.

Recently, the placement unit had two cases which the parents were no longer deemed the most appropriate for reunification. In both cases, the youth were doing very well in placement and on track to complete their treatment goals within 12 months. The officers were able to identify early on other relatives and engaged them in the minor's program, including participating in counseling and trial home passes. These cases were successful because the probation officer identified the instability of the legal parent early on and utilized a concurrent plan with relatives to provide an alternative to reunification. Step down Wrap services were also utilized to further offer support to the youth and relatives post placement.

**ACTION STEP STATUS:** Action Step A: Procedures are in place to ensure that the Probation Department is inquiring about family members beginning at the intake level. All officers are aware of the mandate; however, more emphasis should be placed on the importance of continued inquiry throughout the life of the case, not only to identify relatives for potential placement, but to offer a lifelong connection and support. This can be achieved in Division Meetings with all staff, and further supported in individual unit meetings.

**METHOD OF EVALUATION AND/OR MONITORING:** Monitoring via audits of case files prior to placement as well as ongoing case reviews with staff at regular intervals (pre and post permanency).

**ADDITIONAL STRATEGIES (WHEN APPLICABLE): N/A**  
**PROGRAM REDUCTION: N/A**

## **OBSTACLES AND BARRIERS TO FUTURE IMPLEMENTATION**

### Child Welfare

Since March of 2012, FYC has hired 39 social workers and other staff, and over the next two fiscal years will be adding another estimated 15 for a total of 54 new positions. These positions represent 40% of all FYC staff (Apollo building). The addition of new positions has also created opportunities for current staff to transfer and new social worker supervisor positions. As a result, FYC is experiencing a high level of transition of experienced staff into new program areas.

As a condition of participating in the IV-E Waiver, FYC has begun the daunting task of adding over 50 hours of new training for all social work staff to be ready to implement Safety Organized Practice. This intensive training regime is being delivered through three cohorts each lasting about six months. This means that staff are being asked to complete an incredible amount of additional training within a six month time period and participate in the planning for how the training will be integrated into practice. SOP is taking up a big portion of FYC's attention leaving it with limited resources to attend to other initiatives.

FYC has experienced a significant amount of change over the past several years. With the ambitious scope of the 2014-2019 System Improvement Plan, the county's participation in the IV-E Waiver and other regulatory changes coming in the next several years<sup>1</sup>, it may be difficult if not impossible to carry out all of the strategies included in the 2014-2019 SIP. FYC holds firmly the belief that meaningful system change and development will require the collective impact of all of the strategies listed in the SIP. However, it may be untenable for FYC to achieve it all and may be required to pare down its agenda and subsequently the SIP.

## **PROMISING PRACTICES/ OTHER SUCCESSES**

### Child Welfare

FYC is doing extraordinarily well in some areas. Most notably:

- FYC has expanded ahead of schedule its TEAM program to reach all child welfare cases. The TEAM program embodies a philosophical and cultural shift away from

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<sup>1</sup> New policies and programs under development include Commercially Sexually Exploited Children, Approved Relative Caregiver Funding Option, Continuum of Care Reform and California's Qualitative Case Review process.

professionals deciding the course of action to a model of partnership that has family and youth engagement at the center.

- In 2014, FYC nearly tripled the number of community presentations and mandated reporter trainings over 2013.
- With its robust prevention programs featuring 4 distinct pathways for families to go down at various levels all lower than child removal, Sonoma County continues to celebrate a low rate of recurrence of maltreatment. Additional funds and service types added to the prevention service array, along with additional social worker positions in Emergency Response and Family Maintenance, are expected to continue this strong performance.
- Timely reunification and low re-entry to foster care are stronger than ever right now, evidence of the excellent work of social workers and of effective collaboration with families, Court and service providers.

### Probation

Timely Monthly Caseworker Visits (2F) have remained statistically close to national standards (88.3% to the national standard of 90% as of Q3 2014) while Timely Monthly Caseworker Visits in Residence continues to exceed national standards (93.1% to the national standard of 50% as of Q3 2014). Additionally, Placement Stability (C4.1-C4.3) remains above the national average on all three indicators.

### **Outcome Measures not meeting State/National Standards**

#### Child Welfare

Sonoma County is not meeting state/national standards on the following outcome measures:

Measure	State/National Standard	Q3 2014	Comments
C1.1 Reunification within 12 months (exit cohort)	>75.2%	59.8%	Timeliness of reunification had been just under the national target at the beginning of the SIP and has declined in the exit cohort measure. Performance has improved for the entry cohort measure but is still under the national target. Family reunification cases have become much more complex, with families having multiple co-occurring
C1.2 Median time to reunification (exit cohort)	<5.4 months	9.7 months	
C1.3 Reunification within 12 months (entry cohort)	>48.4%	47.2%	

			problems that take longer than 12 months to resolve.
C2.1 Adoption within 24 months (exit cohort)	>36.6%	28.1%	FYC assumed responsibility for adoptions in July 2013 as part of 2011 realignment. The transition to the county required hiring new staff and creating a new program. Fortunately, the program manager was transitioned to the county as was several state adoptions workers. However, the impact of the transition has impacted performance although the recent decreases are anticipated to be short lived.
C2.2 Median time to adoption (exit cohort)	<27.3 months	28.2 months	
C2.3 Adoption within 12 months (17 months in care)	>22.7%	14.5%	
C2.4 Legally free within 6 months (17 months in care)	>10.9%	7.6%	
C2.5 Adoption within 12 months (legally free)	>53.7%	51.5%	Another factor in adoptions timeliness is court delays. There have been an unusually high number of continuances and filing of appeals has been delayed in a number of cases. These factors are outside of the control of FYC.
C3.1 Exits to permanency (24 months in care)	>29.1%	17.5%	The various exits to permanency measures have long been an area of weakness for Sonoma County. The systemic change required to move the dial on these outcomes is immense and requires full focus and collaboration on many levels to carry out. Due to competing priorities and new or changing regulation, FYC has not yet been able to implement all of the SIP strategies related to this outcome area.
C3.2 Exits to permanency (legally free at exit)	>98%	94.1%	
C3.3 In care 3 years or longer (emancipated/age 18)	<37.5%	47.5%	
C4.1 Placement stability (8 days to 12 months in care)	>86%	83.7%	

C4.3 Placement stability (at least 24 months in care)	>41.8%	41.3%	
2F Monthly visits (out of home)	>90%	83.9%	

## Probation

### **C1.3 Reunification within 12 months**

This measure is closely related to C1.1, and since Q3 of 2012, has shown a similar trend statistically to that of C1.1. We would again emphasize the degree of variability from quarter to quarter is greatly influenced by the relatively small population group of probation youth in placement. Nevertheless, a degree of progress can be seen.

Q3-12	Q4-12	Q1-13	Q2-13	Q3-13	Q4-13	Q1-14	Q2-14	Q3-14
15%	11.8%	35%	60%	38.1%	26.3%	20%	23.1%	35.7%

## State and Federally Mandated Child Welfare/Probation Initiatives

Sonoma County currently participates in, and has implemented, the Fostering Connections After 18 program. Program-funded services include:

- Giving eligible foster youth the ability to remain in foster care and receive services and supports after age 18, and at full implementation, up until the age of 21.
- Providing extended Kinship Guardian Assistance Payments (Kin-GAP) or Adoptions Assistance Payments (AAP) to eligible young adults up until age 21, provided they entered the Kin-GAP or AAP program at age 16 or later.
- Providing extended assistance up to age 21 to young adults placed by the Juvenile Court with a non-related legal guardian and those placed by the Juvenile Court with an approved CalWORKS relative.

FYC and Sonoma County Behavioral Health Division (BHD) routinely collaborate on programs and services of shared interest. Recent among them are the provisions of the class action *Katie A.* lawsuit which requires counties to provide mental health services to children in foster care. In order to meet this requirement, the HSD and BHD meet every other month to discuss

service integration and reporting. Two biannual reports have been successfully submitted to CDSS.

FYC has been a regular participant in the *Continuum of Care Reform* dialogue at the state level. Knowing that group home placements would be a focus of the 2014-2019 System Improvement Plan, Sonoma County developed strategies to reduce group home placements in anticipation of and in coordination with the policy recommendations from the Continuum of Care Reform Workgroup. Further, FYC began immediately to enact the new group home time limits that were put into effect in November 2013 and has strategies included in the SIP to support these regulations.

Sonoma County makes use of several flexible funding opportunities and interagency collaborations to achieve positive outcomes for children and families. One such opportunity is the Family Permanency Collaborative, which is the Sonoma County program for SB 163 Wraparound. The Family Permanency Collaborative is a collaboration of the Human Services Department, Sonoma County Probation Department, Sonoma County Behavioral Health, the Sonoma County Courts and an array of community service providers. The objectives of the Family Permanency Collaborative are to prevent youth from entering group home care and to transition youth already in group home care back into their communities. Sonoma County contracts with Seneca to provide Wraparound and currently has 72 approved Wrap slots.

Another source of flexible funding is the Children's Trust Fund (CTF). Local funds (birth certificate fees, children-themed license plates and donations) are deposited into the trust and used to support high quality child abuse prevention programming. A portion of the CTF is earmarked to fund the child abuse prevention council, *Prevent Child Abuse Sonoma County*, which functions as a countywide advocate for the prevention of child maltreatment. In addition to providing funding the child abuse prevention council, FYC staff participate in quarterly meetings of the council and the educational activities that the council coordinates during child abuse prevention month each year.

Sonoma County utilizes Child Welfare Services Outcomes Improvement Program (CWSOIP) funds to support recruitment, retention and licensure of new foster and adoptive homes. This is a key focus of the 2014-2019 System Improvement Plan.

## CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

### **Priority Outcome Measure or Systemic Factor: No Recurrence of Maltreatment (Measure S1.1)**

**National Standard:** >94.6%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 90.9%.

**SIP Improvement Goal:** Increase rate to 94.6% or higher rate of no recurrence of maltreatment over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 96.3%.

***Analysis:*** *This is an area of strength for Sonoma County. Current performance exceeds the national target.*

### **Priority Outcome Measure or Systemic Factor: Reunification within 12 months (entry cohort) (Measure C1.3)**

**National Standard:** >48.4%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 25%.

**SIP Improvement Goal:** Increase the rate of timely reunification to 48.4% within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 47.2%.

***Analysis:*** *This is an area of strength for Sonoma County. Current performance is ~1 percentage point below the national target. It is nearly double what it was at the beginning of the SIP.*

### **Priority Outcome Measure or Systemic Factor: Re-entry following reunification (Measure C1.4)**

**National Standard:** <9.9%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 5.7%.

**SIP Improvement Goal:** Maintain 9.9% or lower rate of re-entry following reunification over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 2.1%.

***Analysis:*** *This is an area of strength for Sonoma County. Current performance exceeds the national target.*

### **Priority Outcome Measure or Systemic Factor: Exits to permanency (24 months in care) (Measure C3.1)**

**National Standard:** >29.1%

**Performance at beginning of the SIP:** In Q3 2013, the rate was 25.9%.

**SIP Improvement Goal:** Increase to 27% the number of youth (already in care for 24 months or longer) who exit to reunification, guardianship and adoption within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 17.5%.

**Analysis:** *This is an area of weakness for Sonoma County. Current performance is below the national target and has decreased since the start of the SIP.*

**Priority Outcome Measure or Systemic Factor: Youth Authorized for Psychotropic Medication (Measure 5F)**

**National Standard:** N/A

**Performance at beginning of the SIP:** At the time the SIP was approved, the rate had declined after a three year peak averaging 24%. In Q3 2013 was 18.5%.

**SIP Improvement Goal:** Guarantee that only children who need psychotropic medication are authorized for them. (Target <19%)

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate was 20%.

**Analysis:** *This is an area of focus for Sonoma County. The current rate is lower than it was during 2010-2012 but has increased slightly since the start of the SIP.*

**Priority Outcome Measure or Systemic Factor: Least restrictive environment (PIT) (Measure 4B)**

**National Standard:** N/A

**Performance at beginning of the SIP:** In Q3 2013, the rate of relative placements was 27.1%. In Q3 2013, the rate of group home placements was 13.7%.

**SIP Improvement Goal:** Increase to 40% the number of children placed with relatives over 5 years. Decrease to 8% the number of children placed in group homes within 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the rate of children placed with relatives was 22.6%. In Q3 2014, the quarter for which the most current data are available, the rate of children placed in group homes was 12.2%.

**Analysis:** *This is an area of weakness for Sonoma County. The proportion of children placed with relatives has decreased in the one year since the SIP was approved. The proportion of youth placed in group homes has decreased by nearly 2 percentage points but has not yet reached the local goal of 8%.*

**Systemic Factor: Recruitment and retention of foster homes (Systemic Factor)**

**National Standard:** N/A

**Performance at beginning of the SIP:** Sonoma County had 103 licensed foster homes, of which 55 were actively accepting children.

**SIP Improvement Goal:** Increase number of foster homes by 10 homes within 5 years.



Increase by 15 homes the number of treatment foster homes over 5 years.

**Current Performance:** In Q3 2014, the quarter for which the most current data are available, the number of licensed foster homes was 91 of which 60 were active.

**Analysis:** *The number of foster or foster/adoptive homes has increased in the one year since the SIP started. This is an area of continued focus for FYC.*

**Systemic Factor: Quality Assurance (Measures 2B, 2F, 4E, 6B)**

**SIP Improvement Goal:** Complete, accurate client data. Youth, family and community are engaged in case planning and decision making. Consistent social work practice.

**Current Performance/Analysis:** FYC has implemented several programs that have as a cornerstone a family team meeting that includes family and community members on decisions related to placement and case planning. FYC is currently in the midst of training its entire social work staff on Safety Organized Practice. Unit Supervisors consistently use compliance data available through Safe Measures to track their staff's data entry and case management.

**Probation Performance**

Probation chose measure C1.1, reunification within 12 months, because the majority of youth placed in foster care through delinquency proceedings return to the home upon program completion. The national standard/goal for reunification within 12 months is 75%. Baseline data (Q3 2012) indicated that only 25% of probation youth reunified within 12 months.

Sonoma County Probation performance in Q3 2014 on measure C1.1 was 40% (6 of 15 youth reunified within 12 months).

Between 2008 and 2012, probation had an average reunification rate of 30% for this measure, as compared to a state average of 59% for the same period. Because this indicator varies greatly based on the small number of youth being tracked, Sonoma County Probation's goal is to increase our average rate of on this measure by 10% between 2013 and 2018.

Though current performance seems to indicate improvement in this measure, further analysis shows that outcomes in this area are declining as of Q2 2013. To date, progress has been made on implementing the SIP strategies so it is hoped that this trend will slow or reverse in the near future. It should be noted that there are many factors in probation cases which make it challenging to meet the National standard. Also, due to the small number of probation youth who are in out-of-home placement at any given time, there is a great degree of variability by quarter in this measure.

Q3-12	Q4-12	Q1-13	Q2-13	Q3-13	Q4-13	Q1-14	Q2-14	Q3-14
25%	33.3%	38.7%	50%	46.7%	47.6%	47.1%	43.8%	40%

PREVENTION OF CHILD MALTREATMENT		
<b>Prevention Strategy 1:</b> <b>Expand TDM to all initial child removals countywide.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Entry Rates, Recurrence of Maltreatment (S1.1), Family Engagement</b>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	Target: TDM meetings held for over 90% of removals.
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Reconnect with U.C. Davis to reestablish contract for TDM technical support and consultation.	January 2014 <b>Completed.</b>	Initial Services Section Manager TDM Supervisor FYC Training Coordinator
B. Establish monthly meetings with TDM manager, supervisor and consultant to finalize geographic expansion plans.	January 2014-Dec 2014 <b>Completed.</b>	Initial Services Section Manager TDM Supervisor
C. Present plan to a Joint Supervisors' meeting to ensure that all programs are fully aware of TDM protocols and requirements.	March 2014 <b>Completed.</b>	Initial Services Section Manager TDM Supervisor
D. Create and present refresher training on TDM for all ER/VFM/24-hour/weekend staff.	<del>January 2014-June 2014</del> <b>Once per six month for every unit.</b> <b>Ongoing.</b>	Initial Services Section Manager TDM Supervisor FYC Training Coordinator Consultant

E. Establish feedback loop to ensure that all initial placement TDM procedures are followed and that all issues/problems are resolved as quickly as possible.	<del>January 2014-December 2014</del> <b>By June 2015.</b>	Initial Services Section Manager Initial Services Supervisors
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<b>Prevention Strategy 2: Implement 4 Paths to Prevention</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Entry Rates, Recurrence of Maltreatment (S1.1), Family Engagement</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Target: 90% of social workers are trained in the 4 Paths to Prevention model and use decision trees to guide case pathway.
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Complete and publish 4 Paths Policy & Procedure.	December 2013- Jan 2014 <b>Completed.</b>	Initial Services Section Manager VFM, 301 Supervisors Program Planning Analyst
B. Develop advanced training plan for ER, VFM, 301 and Placement units on 4 Paths implementation and practice.	January 2014-June 2014 <b>Completed.</b>	Initial Services Section Manager Initial Services Supervisors FYC Training Coordinator
C. Create feedback loop for supervisors and managers to identify and resolve problems; establish means via section, joint, all-staff, unit meetings and through individual weekly conferences between	<del>January 2014-June 2014</del> <b>By August 2015.</b>	Initial Services Section Manager Initial Services Supervisors Court Services Supervisor

social workers and supervisors.		
D. Ensure that CAPIT/PSSF funding is fully utilized in referring Path 1 families to community services.	January 2014-December 2019	Initial Services Section Manager ER Supervisors Program Planning Analyst
E. Develop standardized training and updates for all social workers in the Initial Services Section using the FSNA.	<del>January 2014-December 2014</del> <b>By August 2015.</b>	Initial Services Section Manager Initial Services Supervisors FYC Training Coordinator

<b>Prevention Strategy 3:</b> <b>Increase utilization and consistency of SDM.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recurrence of Maltreatment (S1.1)</b> Target: Completion rates exceed 90% for Safety, Risk and FSNA Tools.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop advanced training for ER/VFM supervisors and staff.	<del>December 2013-January 2014</del> <b>By June 2015.</b>	Initial Services Section Manager ER/Intake Supervisors FYC Training Coordinator

B. Establish consistent methodology for ER/VFM supervisors to ensure accountability for use of SDM tools, specifically the Safety, Risk and FSNA assessments.	December 2013-June 2014 <b>Completed.</b>	Initial Services Section Manager Initial Services Supervisors
C. Encourage and recruit more social workers to join the SDM workgroup.	<del>January-December 2014</del> <b>Completed and ongoing as needed.</b>	Initial Services Section Manager Intake Supervisors
D. Ensure that SDM is a topic on every Initial Services unit meeting agenda, utilizing My Measures and SDM dashboards.	<del>January 2014-December 2014</del> <b>By June 2015.</b>	Initial Services Section Manager Initial Services Supervisors
E. Include supporting data on SDM compliance from Safe Measures on every Initial Services staff evaluation.	<del>January 2014 and ongoing</del> <b>By June 2015 and ongoing.</b>	Initial Services Section Manager Initial Services Supervisors

<b>Prevention Strategy 4:</b> <b>Deliver effective evidence-based, contracted prevention services that are accessible to families and effectively meet families' cultural and language needs.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recurrence of Maltreatment (S1.1)</b> Target: All HSD-contracted prevention service providers will provide an evidence based model of service delivery, be accessible to families county-wide (either with several locations or home/community-based services), and available in cultures and languages that represent families needs.
	<input checked="" type="checkbox"/> <b>CBCAP</b>	
	<input checked="" type="checkbox"/> <b>PSSF</b>	
	<input type="checkbox"/> <b>N/A</b>	

Action Steps:	Timeframe:	Person Responsible:
A. Ensure that information is shared with currently contracted agencies on the Upstream Portfolio and continued participation is encouraged. Information will be shared annually as the main topic at one quarterly meeting.	December 2014 and annually thereafter <b>Completed and ongoing.</b>	Program Planning Analyst
B. Communicate the expectations to currently contracted agencies about the practical components of the provision of services that are accessible to families and available in the family's home culture/language.	February 2015 <b>Completed.</b>	Program Planning Analyst
C. Complete RFP process for CAPIT/CTF services and outline the requirement to provide accessible, evidence-based and culturally appropriate as a minimum requirement for each proposal.	<del>April 2015</del> <b>April 2016. Aligned with PSSF RFP.</b>	Program Planning Analyst
D. Add reporting requirement to provide data in order to monitor agency compliance in these three areas. Monitoring information will be required as part of quarterly reports as well as annual site visits.	July 2015 and quarterly thereafter	Program Planning Analyst
E. Complete RFP process for PSSF/CBCAP funded services and outline the requirement to provide	April 2016	Program Planning Analyst

accessible, evidence-based and culturally appropriate services as a minimum requirement for each proposal.		
<b>Prevention Strategy 5: Proactively educate and engage the community in a child abuse prevention campaign in order to build a wider safety net for families at risk of recurrence of maltreatment.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Participation Rates (Allegations, etc.); Recurrence of maltreatment (S1.1)</b>
	<input checked="" type="checkbox"/> CBCAP	
	<input checked="" type="checkbox"/> PSSF	Target: 85% FYC community partners and other organizations that have contact with children and families will have an increased sense of understanding of the efforts that they can do to prevent child abuse.
	<input type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop a coordinated outreach program that focuses on widespread child abuse prevention messaging, mandatory child abuse reporting, and relationship building/networking with relevant community groups and partners.	March 2014 <b>and ongoing.</b>	Outreach Workgroup
B. Implement outreach program and effectively communicate child abuse prevention messaging to a target number of participants (as determined in outreach plan).	July 2014 <b>Completed.</b>	Initial Services Section Manager Intake Supervisor Outreach Social Worker
C. Build relationships with service providers through outreach and participation on community collaborative (target outlined in	July 2014 and ongoing	Initial Services Section Manager Intake Supervisor Outreach Social Worker



outreach plan) and help them identify and act upon their roles in child abuse prevention.		
D. Engage community members and contracted service providers in a variety of child abuse prevention activities through community outreach events and the annual Blue Ribbon Campaign (target numbers and groups will be identified in Outreach Plan).	July 2014 and ongoing	Initial Services Section Manager Intake Supervisor Program Planning Analyst Outreach Social Worker
E. Share information about child abuse prevention efforts through technology and other media sources.	July 2015 and ongoing	Initial Services Section Manager Intake Supervisor Outreach Social Worker Communications & Outreach Manager
F. Conduct pre- and post-test to all recipients of child abuse prevention training to evaluate impact of outreach and education on community knowledge.	July 2014 and ongoing <b>Completed and ongoing.</b>	Initial Services Section Manager Intake Supervisor Outreach Social Worker Program Planning Analyst

<b>Prevention Strategy 6: Effectively and consistently engage families in contracted prevention</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recurrence of Maltreatment (S1.1); Family Engagement</b>
	<input checked="" type="checkbox"/> <b>CBCAP</b>	
	<input checked="" type="checkbox"/> <b>PSSF</b>	Target: An average of 70% of referred moderate to high risk

<b>services.</b>	<input type="checkbox"/> N/A	families will actively engage in contracted prevention services, thereby reducing the risk factors that could lead to future child abuse.
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Review and analyze causes for lack of engagement and best practices related to engaging families in prevention services. Gather input from staff, clients and contracted service providers.	Research August 2014 – October 2015. Analysis by December 2015.	Program Planning Analyst
B. Require that agencies implement structured processes for engagement of families that are based upon evidence-based practice. Monitor level of engagement as well as utilization of strategies as part of the quarterly and annual reporting.	March 2015	Program Planning Analyst
C. Provide training to Emergency Response social work staff at least annually to inform them about the various prevention programs and offer support and techniques to encourage family's engagement in these services.	Fall 2015 and annually thereafter	Emergency Response Supervisors Program Planning Analyst
D. Develop task focused work group to identify and discuss strategies that can be implemented by ER social workers to improve engagement.	January to May 2016	Emergency Response Supervisors Program Planning Analyst

E. Implement strategy (ies) recommended by workgroup and approved by Division Director.	December 2016	Initial Services Section Manager Emergency Response Supervisors Program Planning Analyst
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PERMANENCY – TIMELY AND PERMANENT REUNIFICATION		
Reunification Strategy 1: TEAM Engage families, youth and their support system in the decisions and management of their case.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): Reunification Composite; Family Engagement Target: TEAM meetings held for over 80% of eligible cases.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Convene a TEAM meeting steering committee to ensure fidelity to the original TEAM program design.	January 2014 <b>Completed.</b>	TEAM Supervisor
B. Expand the utilization of TEAM meetings to out-of-custody investigations and Court Family Maintenance.	February 2014 <b>Completed.</b>	Placement Section Manager TEAM Supervisor Court Services Supervisor
C. Ensure that service referrals are completed in a timely manner and that families are connected to those services as early as possible upon entering into a case.	<del>April 2014</del> <b>July 2015</b> and every 6 months thereafter	TEAM Clerical Supervisor

D. Convene a mini workgroup with the Voluntary Family Maintenance representatives and TEAM supervisor to strategize implementing TEAM in VFM.	May 2014 <b>Completed.</b>	TEAM Supervisor Placement Section Manager VFM Supervisor
E. Expand the utilization of TEAM meetings to Voluntary Family Maintenance and Informal Supervision.	July 2014 <b>Completed.</b>	Placement Section Manager TEAM Supervisor
G. Convene a mini workgroup with Permanency Planning representatives and the TEAM supervisor to strategies expanding the use of TEAM Meetings in PP and for which foster youth.	January 2015 <b>Completed.</b>	TEAM supervisor Placement Section Manager PP Representatives and supervisor
H. Expand the utilization of TEAM meetings in permanency planning to every six months.	<del>August 2015</del> <b>Completed.</b>	Placement Section Manager TEAM Supervisor

<b>Reunification Strategy 2: Safety Organized Practice</b>  <b>Implement a holistic approach to collaborative teamwork that builds and strengthens partnerships within a family, their support network and FYC.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Family Engagement</b>  Target: 80% of all workers learn and implement the strategies of Safety Organized Practice.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	

Action Steps:	Timeframe:	Person Responsible:
A. Research Safety Organized Practice to assess fit in Sonoma County including sending select supervisors or workers to an SOP training.	June 2014 <b>Completed.</b>	Placement Section Manager Initial Services Section Manager
B. Develop Implementation Plan for SOP reflecting multiple implementation options including a staggered implementation approach.	<del>October 2014</del> <b>By October 2015.</b>	Division Director Placement Section Manager Initial Services Section Manager Planning Analyst Selected supervisors or workers
C. Incorporate SOP into TEAM meetings that uses the structure, language and case planning.	<del>January 2015</del> <b>By December 2015.</b>	Placement Section Manager TEAM Supervisor
D. Truncated training for managers and supervisors case planning and interviewing methods of SOP.	<del>September 2015</del> <b>Completed September 2014.</b>	Placement Section Manager Initial Services Section Manager
E. Teach all case-carrying social workers how to write case plans using SOP methods and language.	<del>January 2015</del> <b>By December 2015.</b>	Placement Section Manager Selected Supervisor in placement

F. Train all Emergency Response Workers SOP interviewing techniques.	August 2015	Initial Services Section Manager Selected Supervisor in ER
G. Train all Case-Carrying Social Workers SOP interviewing techniques.	March 2016	Placement Section Manager Permanency Section Manager

<b>Reunification Strategy 3: Ice-Breaker Meetings</b>  <b>Encourage a co-parenting model when youth enter foster care between their natural family and the foster parent.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Family Engagement, Timely Reunification</b>  Target: 80% of initial placements will participate in an ice-breaker meeting within the first three weeks of placement. 65% of all subsequent placements will participate in an ice-breaker meeting.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Continue the workgroup of social workers, placement supervisors, foster parents, parents, youth and stakeholders to re-implement ice-breaker meetings.	<del>January 2014</del> By January 2015 and quarterly ongoing.	Family Reunification Supervisor

B. Identify needs, resources and training to have ice-breaker meetings at every <i>initial placement</i> .	<del>January 2014</del> By December 2015.	Family Reunification Supervisor Placement Section Manager Court Services Supervisor
C. Develop a tracking system to identify if ice-breaker meetings are happening.	<del>January 2014</del> By December 2015.	Court Services Supervisor
D. Re-implement ice-breaker meetings for all initial placements.	March 2014 Completed.	Family Reunification Supervisor Placement Section Manager Court Services Supervisor
E. Develop a survey and a method to collect the information that queries foster parents and biological parents on the effectiveness of ice-breaker meetings.	<del>April 2014</del> By December 2015.	Family Reunification Supervisor Placement Section Manager Planning Analyst
F. Assess the need for training staff on the purpose of ice-breaker meetings and how to facilitate them.	<del>June 2014</del> By July 2015.	Family Reunification Supervisor Placement Section Manager
G. Train staff on the purpose of ice-breaker meetings and how to facilitate them.	<del>December 2014</del> By September 2015.	Family Reunification Supervisor Placement Section Manager



H. Implement ice-breaker meetings for all placement changes.	<del>June 2015</del> <b>By December 2015.</b>	Family Reunification Supervisor Placement Section Manager
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<b>Reunification Strategy 4: Parent Partner Program</b>  <b>Connect each parent entering family reunification with someone who is familiar with navigating the child welfare and dependency court system.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Family Engagement; Timely Reunification</b>  Target: 80% of all parents entering the family reunification program will be assigned a parent partner.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Research different models in other counties that have a parent partner program. What population did they serve and what were their duties?  Scripted list of questions to ensure consistent information is gathered.	April 2015  <b>Completed.</b>	Placement Supervisors Placement Social Workers Program Analyst
B. Continue to pilot one parent partner with one family reunification parent assigned to a supervisor for support and to gather lessons learned.	Ongoing	Family Reunification Supervisor

C. Convene an internal workgroup to design a parent partner program for Sonoma County	May 2015 <b>Completed.</b>	Placement Section Manager Program Analyst Placement Supervisor
D. Propose a finalized draft to the HSD Director.	January 2016 <b>Completed.</b>	Parent Partner Workgroup Placement Section Manager
E. Research funding sources and seek out possible grant opportunities.	January 2014 – April 2016 <b>Completed.</b>	Placement Section Manager Program Analyst
F. Send a Request for Proposal for contracting a Parent Partner Program.	Tbd based on funding <b>Funding requested in 2015-2016 Budget.</b>	Placement Section Manager Program Analyst
G. Implement a Parent Partner Program for Sonoma County.	<del>November 2016</del> <b>January 2016</b>	Placement Section Manager Program Analyst

<b>Reunification Strategy 5: Parent Orientation Program</b>  <b>Orientation to family reunification and the dependency system will help give families a head start into their services.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Family Engagement; Timely Reunification</b>  Target: 90% of all families entering the dependency system will attend a Parent Orientation.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Explore Funding sources.	January 2014 – February 2015  <b>Completed.</b>	Placement Section Manager
B. Submit a Request for Proposals for a contractor to implement Sonoma County's Parent Orientation Program.	April 2015	Placement Section Manager Planning Analyst
C. Implement a Parent Orientation Program.	July 2015	Placement Section Manager Planning Analyst

<b>PERMANENCY FOR OLDER YOUTH</b>		
<b>Permanency for Older Youth Strategy 1: Implement county adoptions program with a focus on adoption of older youth.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Exits to Permanency (C3.1)</b>  Target: Increase number of youth over age 10 exiting to permanency by 10% over 5 years.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	

Action Steps:	Timeframe:	Person Responsible:
A. Analyze the effectiveness of current PP/Adoption Review meeting in identifying appropriate referrals for adoption assessment and guardianship appointments.	<del>December 2014</del> By December 2015.	Permanency Planning Supervisor (Fred) Adoptions Supervisor (Raquel)
B. Identify children in out of home care for over 24 months without a plan of adoption on an ongoing basis; Categorize population according to placement type, such as group home care, relative care, NREFM care, ITFC, certified foster home and licensed foster home.	<del>December 2014</del> By December 2015.	Program Analyst
C. Create outreach message to youth of positive adoptions outcomes.	June 2015	Permanency Section Manager Permanency Supervisor Communications & Outreach Manager
D. Identify youth who enter FY&C after the age of 6 and those in a sibling group if one of the children is under six to monitor all methods of concurrent planning	<del>June 2014</del> By December 2015.	Program Analyst
E. Explore the department's philosophy of out of area placement s for youth verses concurrent placement both during FR and post termination of FR	January 2015 to December 2017 (see Practice Model strategies on page 102)	<del>Practice Model Steering Committee</del> Division Director

services.		
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<b>Permanency for Older Youth Strategy 2: Engage group home programs in the examination of current placement practice</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least Restrictive Environment</b> Target: Reduce to 8% the rate of youth placed in group homes within 5 years.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
<b>A.</b> Utilize the Placement Support Redesign concept currently in development and implementation to interject adoption planning.	June 2014 <b>Completed.</b>	Placement and Permanency Section Managers
<b>B.</b> Implement All County Letters 13-86 and 13-87 regarding length of time in group homes.	January 2014 and ongoing.	Division Director Placement, Permanency & VMCH Section Managers

## CONTINUUM OF PLACEMENT OPTIONS

Improve assessment processes to support permanency-oriented placements.		
<b>Placement Assessment Strategy 1:</b> <b>Create a process for collaborative and goal-oriented placement assessment (initial and ongoing).</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Least Restrictive Environment, Youth Well Being; Placement Stability
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	Target: 80% of appropriate program staff are trained in use of CANS. 90% of youth who enter out of home placement are assessed with CANS within 30 days of removal.
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Leadership to attend the Child & Adolescent, Needs and Strength (CANS) training to learn that assessment tool and determine whether it should be provided in Sonoma County to assess the placement needs of every child in Sonoma County.	January 2014 <b>Completed.</b>	Division Director FYC managers
B. Develop a training and implementation plan for the CANS assessment tool, in collaboration with county and community partners. Including how CANS tools will be used for initial and ongoing assessment.	<del>February 2014 to September 2014</del> <b>By January 2016.</b>	Division Director Placement, Permanency & VMCC section managers Behavioral Health Bay Area Academy

C. Arrange training opportunities for interested FYC staff, especially supervisors, as well as community partners, other county staff to attend CANS training in the Bay Area.	<del>February 2014 to September 2014</del> <b>March 2016 through September 2016</b>	FYC Managers FYC Training Coordinator
D. Roll out the training of the CANS assessment tool for all placement social workers and the placement unit.	<del>October 2014 to January 2015</del> <b>October 2016 to January 2017.</b>	Bay Area Academy FYC Training Coordinator
E. Begin implementation of CANS	<del>January 2015</del> <b>By January 2017.</b>	FYC Managers
F. Ensure that use of assessment tools is in line with the recommendations of the statewide continuum of care group.	<del>January 2014 to January 2015</del> <b>When CCR recommendations are available.</b>	Division Director Designated Manager
G. Engage with the statewide continuum of care work group to ensure access to statewide resources to roll out the continuum of care in Child Welfare in terms of training, technical assistance and community agency/political buy in.	January 2014 to January 2016	Division Director Designated Manager
<b>Placement Assessment Strategy 2: Create a process assessing the support needs of substitute care</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Retention of Foster and Relative Caregivers</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Target: 80% of appropriate staff are trained in the selected



<b>providers.</b>	<input checked="" type="checkbox"/> N/A	SCP assessment tool. 90% of SCPs are assessed with selected tool.
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop and implement a tool for assessing the needs of caregivers and children placed in their care.	<del>January-June 2014</del> By December 2015.	Substitute Caregiver Assessment Workgroup
B. Train staff on tool for assessing the needs of caregivers and children placed in their care.	<del>July 2014</del> By January 2016 – March 2016.	Substitute Caregiver Assessment Workgroup FYC Training Coordinator
C. Placement unit will take recommendations from the tool (services, referrals, etc) and provide a written list of follow up items to the social worker; much like a closing summary.	<del>July-December 2014</del> By March 2016 and ongoing.	VMCC Section Manager Placement Team Supervisor
D. Social workers use summary of service needs at monthly in person meetings with the caregiver and will continue to assess service & support needs.	<del>July to December 2014</del> By March 2016 and ongoing.	Placement & Permanency Section Managers Placement & Permanency Supervisors Placement & Permanency Social Workers

E. Placement supervisors to review with Social Workers Placement Assessment Tools and Follow up Services & Support Bi-monthly.	<del>June 2014–December 2014</del> <b>By March 2016 and ongoing.</b>	Placement & Permanency Section Managers Placement & Permanency Supervisors
F. Placement supervisors to ensure in person contacts are completed 50% of the time in the caregiver's home and that they meet with the caregiver as well as the child.	<del>June 2014–June 2015</del> <b>Ongoing.</b>	Division Director Placement & Permanency Section Managers Placement & Permanency Supervisors
G. In partnership with SRJC, organize an annual conference for all substitute care providers to provide them with the opportunity for training, networking and support.	January of each year. <b>Completed in 2014.</b>	VMCC Section Manager FYC Training Coordinator Santa Rosa Junior College
<b>Placement Assessment Strategy 3: Use VMCH as an opportunity for a comprehensive assessment.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Placement Stability; Timely Reunification; Youth Well-Being</b>  Target: 95% of children at VMCH are assessed within first 30 days of placement at VMCH.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Update MOU with Mental Health to allow for more rapid Screenings and CANS assessments	April 2014 <b>Completed.</b>	Division Director VMCC Section Manager Behavioral Health

B. Create process for collaborative approach to CANS completion and ongoing assessment with placement.	<del>June 2014</del> By January 2016.	Division Director VMCC Section Manager Behavioral Health
C. Develop or select tool for trauma assessment with mental health	<del>January 2015</del> By January 2016.	Placement, Permanency & VMCC section managers
D. Review multi-disciplinary team (MDT) meeting purpose and enhance to include a stronger placement evaluation component. Have VMCH SW facilitate this meeting.	August 2014-February 2015	VMCC Section Manager VMCC Program Manager Placement Team Supervisor
E. Create a Discharge Summary from VMCH that includes all assessments and services received while at VMCH; and all follow up services (ex: doctor/dental/behavioral health apts.)	March 2015-June 2015	VMCC Section Manager VMCC Program Manager VMCH Supervisors
F. Implement new VMCH database, MyEvolv, that will allow better communication between VMCH Staff & Social Workers including instant access to progress, shift notes, medications, assessments, etc.	<del>September 2014-March 2015</del> By July 2016.	Division Director VMCC Managers Program Analyst Information Technology

Focus on Recruitment		
<b>Recruitment Strategy 1:</b> <b>Recruit and develop treatment foster homes.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Least Restrictive Environment; Exits to Permanency (C3.1)
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	<b>Target:</b> 15 Treatment Homes in Sonoma County in 5 years.
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Establish quarterly meetings with local FFAs that have existing MOUs to provide ITFC homes to discuss the ways that we can assist and support them in their recruitment efforts.	<del>Start the series in February 2014</del> <b>Resume the series in April 2015.</b>	Division Director
B. Examine the ways to streamline the approval process for ITFC homes in partnership with Behavioral Health.	February to April 2014 <b>By July 2015.</b>	Placement & Permanency Section Managers
C. Consult with other counties and agencies that have successful ITFC programs. Examine ways that they conduct their work and identify strategies or ideas that may be transferrable to Sonoma County.	<del>May to August 2014</del> <b>By July 2015.</b>	Placement & Permanency Section Managers

D. Work with Behavioral Health regarding the implementation of Katie A, including a review of the guidelines provided by CDSS regarding Treatment Foster Homes.	<del>January to March 2014</del> <b>Waiting for guidelines from CDSS.</b>	Division Director Placement & Permanency Section Managers Behavioral Health
E. Work collaboratively with Behavioral Health to determine ways to develop or expand Treatment Foster Homes. This may include different funding strategies that need to be explored or explaining the guidelines to community partners so that they can move forward with implementation.	<del>April to December 2014</del> <b>By December 2015.</b>	Division Director Placement, Permanency & VMCC Section Managers Behavioral Health
F. As part of the ongoing discussions with group home providers, engage with additional local agencies , residential treatment providers and FFAs to explore the potential of developing additional ITFC MOUs	December 2014 to December 2016	Division Director Placement & Permanency Section Managers Program Analyst
<b>Recruitment Strategy 2:</b> <b>Identify relatives/NREFMs early in the process and improve the recruitment and retention of placements in relative/NREFM homes.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least Restrictive Environment; Timely Reunification; Exits to Permanency</b>  Target: Increase to 35% the rate of children placed with relatives within 5 years.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>

A. Establish a work group that includes ER and placement social workers to review and revise the policy and procedure for emergency placement with relatives.	January to June 2014 <b>Completed.</b>	Initial Services & VMCC Section Managers
B. Train all ER social workers on the revised policy and develop strategies for ways that placement social workers can support ER workers in this process.	<del>July to September 2014</del> <b>By July 2015.</b>	Initial Services & VMCC Section Managers
C. Provide ICWA training to all ER and placement social workers to include a clear explanation of the Sonoma County ICWA protocol, which includes communicating with the appropriate tribes regarding emergency placement.	<del>By June 2014</del> <b>By December 2015.</b>	Initial Services Section Manager Bay Area Academy FYC Training Coordinator
D. Continue to more clearly define the role of the SSW III in Court Services when interviewing parents at the time of detention to ensure that all potential relatives and extended family connections are identified and documented.	December 2013 to June 2014 <b>Completed.</b>	Placement Section Manager Court Services Supervisor
E. Ensure that an agreement between CDSS and SRJC is in place and enforced so that the funds provided to the JC are used as effectively as possible to educate and train relative/NREFM	<del>January to December 2014</del> <b>By December 2015.</b>	Division Director VMCC Section Manager

F. Complete an assessment of the needs that are being met or not met regarding support services for relative/NREFM homes.	<del>January 2014</del> <b>By December 2015.</b>		Program Analyst
G. Complete the RFP process for the contracting of KSSP funds with a provider that more effectively meets the needs of relative/NREFM homes.	By June 2014 <b>Completed.</b>		Division Director Program Analyst
H. Explore the potential for a community agency or FYC to provide a social worker position to serve as a coordinator for all relative/NREFM homes.	By December 2014 <b>Staff position requested in 2015-2016 Budget.</b>		Division Director VMCC Section Manager Program Analyst
I. Work with local tribes to develop and enhance their own placement recruitment, approval and support processes to identify potential relative and NREFM homes.	September 2014 – September 2015		VMCC Section Manager Placement Section Manager
J. Examine the agency values about the prioritization of relative and NREFM homes for adoption/guardianship/permanency.	January 2015 to December 2017 (see Practice Model strategies on page 102)		FYC Managers
<b>Recruitment Strategy 3:</b> <b>Build the momentum developed through the Quality Parenting Initiative</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes</b> Target: Increase the number of foster homes by 10% in 5 years.	
	<input type="checkbox"/> CBCAP		
	<input type="checkbox"/> PSSF		
	<input checked="" type="checkbox"/> N/A		
<b>Action Steps:</b>	<b>Timeframe:</b>		<b>Person Responsible:</b>



A. Through QPI develop a plan for training and implementation of the Partnership Plan first for social workers and then foster parents.	January to December 2014 <b>Training completed Fall/Winter 14-15</b> <b>Implementation still going</b>	VMCC Section Manager FYC Training Coordinator Bay Area Academy
B. Hold a conference for caregivers and the community that supports all foster and kin caregivers (including FYC social workers, FFA social workers, community partners, tribes, court representatives).	January 2014 <b>Completed in January 2014.</b>	VMCC Section Manager FYC Training Coordinator Santa Rosa Junior College
C. Develop a training plan for social workers and caregivers to ensure that the Partnership Plan is followed.	<del>February 2014 to December 2014</del> <b>August 2015</b>	VMCC & Placement Section Managers FYC Training Coordinator Bay Area Academy
D. Identify what areas of the Partnership Plan need to be given additional resources. e.g. access to timely services. In coordination with the statewide continuum of care recommendations, and implementation.	January to December 2015 <b>Working with Division Director and QPI team</b>	Placement & Permanency Section Managers
E. Implement the end of placement survey that will identify areas that need improvement and analyze the results.	Starting January 2014 and ongoing. <b>Analyze survey results beginning July 2014 and every 6 months thereafter.</b> <b>March 2015-ongoing</b>	Placement & Permanency Section Managers Placement Team Supervisor Program Analyst

F. Once the areas for improvement have been identified, develop a method of ensuring that social workers and foster parents are meeting the “Fostering expectations” standards expected of them.	<del>July 2014 to December 2014</del>  June 2015-June 2016	Placement & Permanency Section Managers  Placement Team Supervisor
G. Incorporate the foundations, principles and expectations from QPI into all pre service training for caregivers.	<del>September 2014 to August 2015</del>  March 2015-August 2016  In progress	VMCC & Permanency Section Managers  FYC Training Coordinator  Bay Area Academy  Santa Rosa Junior College

<b>Recruitment Strategy 4:</b>  <b>Implement targeted outreach and marketing to recruit for Latino and African American foster parents and for foster homes for older youth, sibling groups and children with special needs including autism.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes</b>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	Target: Increase by 5% each the number of foster homes available to Latino and African American children, sibling groups, older youth and children with autism.
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Work with the statewide QPI initiative to identify consultation resources to specifically work on marketing strategies targeting these specific groups.	<del>January to December 2014</del> By December 2015.	VMCC Section Manager  VMCC Program Development Manager

B. Work with local media outlets, newspaper, radio, TV, to feature a series of articles or other media stories to focus on the work of all foster parents with varying family constellations and ethnicities, and encourage more people to consider becoming a foster parent.	June 2014 to June 2015 <b>Ongoing.</b>	VMCC & Permanency Section Managers VMCC Program Development Manager Communications and Outreach Manager
C. Produce new FYC program and recruitment materials.	February 2014 – June 2015 <b>Completed and ongoing.</b>	Division Director VMCC & Permanency Section Managers Communications and Outreach Manager Placement Team Supervisor Foster Parent Recruiter Program Analyst
D. Train all HSD staff on recruitment messaging and provide them with materials and contact information for them to give to people that might be interested in becoming a foster parent.	January to December 2016	VMCC & Permanency Section Managers FYC Training Coordinator
E. Target churches, schools, Latino leadership groups, African American Chamber of Commerce etc for specific outreach in conjunction with QPI.	<del>June 2014</del> <b>June 2015</b> to June 2016	Recruitment Team Placement Team Supervisor VMCC Section Manager
F. Combine recruitment efforts with existing community wide initiatives eg. Faith based initiative/community challenge, National Adoptions month,	<del>June 2014</del> <b>June 2015</b> to June 2016	Recruitment Team Placement Team Supervisor VMCC Section Manager

Child Abuse Prevention month.		Communications & Outreach Manager
G. Consider other ways to provide incentives for existing foster parents, FYC staff to recruit new caregivers from their own communities.	January 2015 to December 2015	Division Director VMCC Section Manager
H. Increase FYC participation in specific existing adoptions recruitment processes for older and special needs children, such as child available, BALSAs, national websites etc.	January 2014 to December 2015 <b>Ongoing.</b>	Permanency Section Manager
I. Research the possibility of building a moving Heart Gallery featuring Sonoma County children who are waiting for permanent homes.	January to December 2015	Division Director VMCC & Permanency Section Managers
J. Explore ways of using the TEAM, TDM meetings to reach out to community members that may be potential foster parents.	<del>June 2014</del> <b>June 2015</b> to June 2016	Permanency, Placement & Initial Services Section Managers
<b>Recruitment Strategy 5:</b> <b>Increase the number of FYC social work staff who lead foster parent orientations.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Target: 10% of social workers participate in at least one foster parent orientation annually.
	<input checked="" type="checkbox"/> <b>N/A</b>	

Action Steps:	Timeframe:	Person Responsible:
A. Identify staff from FYC with the necessary skill set to actively participate with the existing recruitment team at orientation, recruitment fairs, and pre service training.	December 2013 to December 2015 <b>Completed and ongoing.</b>	Division Director VMCC & Permanency Section Managers Communications and Outreach Manager Placement Team Supervisor VMCC Program Development Manager Adoptions Supervisor
B. Authorize comp time to staff to compensate them for spending this additional time on recruitment efforts.	December 2013 to December 2015 <b>Completed and ongoing.</b>	Division Director VMCC Section Manager
C. Build on our existing recruitment team by hiring an additional SSW III to assist the existing staff with recruitment.	March 2014 <b>Completed.</b>	VMCC & Permanency Section Managers
<b>Develop and reinforce support services to support placement.</b>		
<b>Retention Strategy 1:</b> <b>Improve support to relative caregivers.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least restrictive environment; Timely reunification</b>  Target: 65% of relatives report feeling well-supported by the department and its contracted providers.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
Action Steps:	Timeframe:	Person Responsible:

A. Complete an assessment of the needs that are being met or not met regarding support services for relative/NREFM homes.	January 2014 <b>Completed.</b>	Program Analyst
B. Complete the RFP process for the contracting of KSSP funds with a provider that more effectively meets the needs of relative/NREFM homes to include a case management service component.	By June 2014 <b>Completed.</b>	Division Director Program Analyst
C. Explore the potential for a community agency or FYC to provide a social worker position to serve as a coordinator for the highest need relative/NREFM homes.	By December 2014 <b>Staff position requested in 2015-2016 Budget.</b>	Division Director VMCC Section Manager Program Analyst
D. Re-develop and implement a training program that meets the needs of relative caregivers	<del>September 2014 to August 2015</del> <b>July 2015-December 2015</b>	VMCC Section Manager Program Analyst FYC Training Coordinator Santa Rosa Junior College
E. In partnership with SRJC, provide an annual conference for all substitute care providers including relative caregivers to provide opportunities for support, networking and training.	January each year <b>Completed in 2014.</b>	VMCC Section Manager FYC Training Coordinator Santa Rosa Junior College

F. Increase child care funding to allow more relatives to successfully provide foster homes for their kin.	July 2014 to June 2017 <b>Increased funding by \$100,000 in 2014-2015 budget. Will augment as needed and as funds are available.</b>	Division Director Program Analyst Department Director
G. Create and implement a survey/focus groups of relative caregivers to assess the caregiver perception of feeling supported by the department.	<del>Survey finalized September 2014.</del> <b>June 2015.</b> Administered prior to exit or at placement termination. Focus groups held annually.	VMCC, Placement & Permanency Section Managers Communications and Outreach Manager Program Planning Analyst
<b>Retention Strategy 2:</b> <b>Create supports for transition from group home to family setting.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least restrictive environment; exits to permanency.</b>  Target: 65% of group homes and transition home report feeling well-supported by the department and its contracted providers during time of transition.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Engage with group homes and FFA's to clearly define the initial assessment and referral, and ongoing treatment process so that a clear plan is developed for each child about discharge at the time of entry into the group home placement.	January 2014 to <del>December 2014</del> <b>June 2015.</b>	Division Director VMCC, Placement & Permanency Section Managers

B. Convene all local FFA's, group home providers and other interested community based agencies to envision local continuum of care services through county/community partnerships.	May 2014 <b>Completed.</b>	Division Director FYC Training Coordinator Bay Area Academy
C. Continue to participate with the statewide continuum of care work group to contribute to the recommendations for how transition services will be structured and resourced to ensure greater continuity for children as they transition from group care to a family.	January 2014 to <del>June 2015</del> <b>Completed. CCR Report issued January 2015.</b>	Division Director Designated Manager
D. Work in partnership with Behavioral health, probation and community providers to structure transition services in a way that ensures smoother transitions for children.	<del>June 2014-December 2014</del> <b>June 2015</b>	Placement & Permanency Section Managers Mid-Level Committee
E. Provide multi disciplinary training for social workers and CBO staff to enhance the effectiveness of service coordination.	<del>January 2015</del> <b>December 2015</b>	FYC Managers FYC Training Coordinator
F. Hold focus groups of group home providers to assess their perception of feeling supported by the department and its contractors that provide support to youth transitioning back to the community, e.g. Wraparound	Focus groups held annually.	Division Director VMCC, Placement & Permanency Section Managers Program Planning Analyst



<b>Retention Strategy 3:</b> <b>Enhance support to emergency foster homes and county foster homes.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes.</b> Target: 65% of licensed foster parents report feeling well-supported by the department and its contracted providers.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Create stronger respite network to foster home by collaborating with FFAs and creating social opportunities for respite providers to meet caregivers.	January 2015-June 2015	VMCC Section Manager Placement Team Supervisor FFAs
B. Enhance existing Special Care Increment for EFH homes that specialize in medically fragile infants	January <del>2014</del> 2016.	Division Director Placement Section Manager FR Supervisor EFH Coordinator Fiscal Manager
C. Provide specialized training for caregivers who take substance exposed infants and young children.	December 2014-December 2015	Division Director VMCC Section Manager FYC Training Coordinator
D. Provide multi-disciplinary training opportunities for caregivers that includes child welfare, courts, VMCH, CASAs, tribes, etc.	January 2014-December 2019	VMCC & Permanency Section Managers FYC Training Coordinator

E. Re-establish formalized mentoring program within emergency foster care program.	December 2014-December 2016	VMCC Section Manager Placement Team Supervisor Foster Parent Recruiter EFH Coordinator
F. Develop and implement an informal complaint process for caregivers and social workers that outlines the specific steps for addressing concerns at the lowest level possible.	January 2014 to December 2014 <b>Completed.</b>	Division Director VMCC & Placement Section Managers Redwood Empire Foster Parent Association
<b>Retention Strategy 4:</b> <b>Increase the amount of training and education offered to substitute care providers.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Targets: At least 75% of foster parents are satisfied with the training and education offered by the County. 50% of relative caregivers participate in training offered by County.
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Review the current pre-service curriculum (PRIDE) offered by the SRJC	July 2014-February 2015 <b>Completed.</b>	VMCC & Permanency Section Managers Santa Rosa Junior College
B. Revise the pre-service curriculum to include the new statewide Trauma Informed Parenting & QPI components.	February 2015-July 2015	VMCC & Permanency Section Managers Santa Rosa Junior College Kinship Support Contractor Placement Team Supervisor

C. Create a written agreement with SRJC re: service provision for Foster & Kinship Education.	<del>April 2014-June 2014</del> <b>June 2015</b>	Division Director VMCC Section Manager Santa Rosa Junior College
D. Expand BAA & UC Davis training contract to include training for caregivers (2 per year).	<del>March 2014-June 2014</del> <b>July 2015-December 2015</b>	Division Director FYC Training Coordinator
E. Collaborate with FFAs, REFPAs & Training Partners to provide 2 full day trainings per year with renowned expert presenters. Budget funding to pay a portion of the event.	January 2015-June 2015	VMCC, Placement & Permanency Section Managers
<b>Retention Strategy 5:</b> <b>Ensure coordinated services to children and caregivers at the time of placement (timely, seamless).</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Recruitment and retention of foster homes; Child well-being</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Target: 65% of substitute care providers report receiving timely, coordinated services for children placed in their homes.
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Use TEAM support to immediately coordinate & refer children to services as part of their case plan.	<del>March 2014</del> <b>Ongoing.</b>	Placement Section Manager TEAM Supervisor

B. Develop agreements with service providers regarding prioritization of referrals for children in care.	<del>December 2014</del> <b>June 2015</b>	Division Director Program Analysts
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<b>Formalize the continuum of placement options.</b>		
<b>Continuum Strategy 1:</b> <b>Use group homes strategically.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least restrictive environment</b>
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	Target: 95% of youth are assessed using the new, coordinated, multi-level assessment process prior to placement in group homes.
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop review process for all children already placed in group homes to ensure steps are being taken to identify and move a child towards placement in a family setting.	<del>January 2014 to June 2014</del> <b>Monthly, ongoing.</b>	Division Director VMCC, Placement & Permanency Section Managers
B. Continue to work with local group homes to clarify the assessment process, treatment planning, discharge planning and data collection to ensure that only appropriate children are referred to a group home placement, and that once placed they receive effective, evidence based treatment moving towards an	January 2014 to <del>June 2015</del> <b>December 2014</b>	Division Director VMCC, Placement & Permanency Section Managers

appropriate transition plan.		
C. Convene local FFAs and group home providers at FYC to offer an opportunity for guidance from another county/state that has successfully implemented a short term treatment model and step down to a family setting. This would also give direction/networking opportunities to agencies to reconfigure the services that they provide.	May 2014 <b>Completed.</b>	Division Director Program Analyst FYC Training Coordinator
D. Participate in the statewide continuum of care reform discussion to help guide the way residential programs will be used in the future.	January 2014 to June 2015 <b>Completed.</b>	Division Director Designated Manager
E. As part of the continuum of care reform efforts ensure that any resources and/or technical assistance can be accessed by Sonoma County to provide effective group home care.	January 2014 to June 2015 <b>Completed.</b>	Division Director Designated Manager
F. Identify the agency values about the use of group home care and provide training/clarification/policies about how these values will be put into action.	January 2015 to December 2017 (see Practice Model strategies on page 102)	FYC Managers
<b>Continuum Strategy 2:</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic</b>
	<input type="checkbox"/> <b>CBCAP</b>	

<b>Redesign placement process.</b>		<b>Factor(s): Least Restrictive Environment; Timely Reunification</b>
	<input type="checkbox"/> <b>PSSF</b>	Target: 90% of cases targeted for the Placement Unit are referred and served by the Placement Unit.
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Create a dedicated placement unit, whose function is not only to place children that have just entered foster care, but also re-examining the placement options of children, particularly those living in group home care, with a focus of stepping them down into lower level placement options.	January 2014 <b>Completed.</b>	Division Director VMCC Section Manager
B. Add a bilingual placement specialist position to help address the additional workload of reviewing children not in permanent placements.	February 2014 <b>Completed.</b>	VMCC Section Manager Placement Team Supervisor
C. Identify the gaps in current placement process and prioritize solutions to address these gaps.	November 2013 to December <del>2014</del> <b>2015</b>	VMCC Section Manager Placement Team Supervisor Program Analyst

<b>Continuum Strategy 3:</b> <b>Prioritize the use of Wraparound to youth already in higher levels of care.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least Restrictive Environment; Exits to Permanency (C3.1)</b>  Target: Over the five years of the SIP, 40% of youth referred to the Wraparound Program are “step-down” youth.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop the RFP for the Wraparound program with a priority for stepping children down from high levels of care.	December 2013 to January 2014 <b>Completed</b>	Division Director Designated Manager Probation Behavioral Health
B. Complete a request for proposals process for Wraparound services.	January 2014 to June 2014 <b>Completed</b>	Division Director Designated Manager
C. Work with the 2014-2015 Wraparound provider and FYC staff to implement the modified scope of work.	July 2014 to June 2017	Placement Section Manager Permanency Section Manager

<b>Continuum Strategy 4: Expand LifeLong Connections.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least Restrictive Environment; Exits to Permanency (C3.1)</b>  Target: The program expands to 36 slots. 100% of 36 slots are utilized. "Active" connections are produced for more than 50% of the youth referred to LifeLong Connections.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Write a proposal for the Partnership for expansion of the existing contract for LLC to 36 slots using Wrap reinvestment funds and obtain approval from the Partnership.	December 2013 <b>Completed</b>	Division Director Designated Manager
B. Work with Seneca to more clearly define the scope of work for this contract.	January to March 2014 <b>Completed</b>	Division Director VMCC, Placement & Permanency Section Managers
C. Develop a mechanism to ensure the highest priority for LLC referral is given to children who have been in group home care for the longest period, who do not have Lifelong Connections.	<del>April 2014 to June 2014</del> <b>June 2015</b>	VMCC, Placement & Permanency Section Managers Placement Team Supervisor Permanency Supervisor
D. Develop a way of tracking the number of LLC's that are identified and how many translate into placements.	<del>January 2014 to June 2015</del> <b>June 2015</b>	Designated Section Manager Program Analyst CWS/CMS Administrative Aide



E. As part of this extended contract, ensure that the specific outcome of exits to permanency is achieved for as many children as possible.	<del>January 2014 to June 2015</del> <b>Ongoing.</b>	Placement & Permanency Section Managers Permanency & Adoptions Supervisors
<b>Continuum Strategy 5: Expand Team Decision Making to include all placement changes.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Least Restrictive Environment; Family and Youth Engagement</b>  Target: Within 5 years, more than 75% of cases will hold TDM meetings prior to a change in placement.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Confirm the decision to roll out the entire TDM process throughout the life of every case.	March 2014 <b>Completed.</b>	FYC Managers
B. Further discussion re implementation of this decision at the joint supervisor/manager meeting.	April 2014 <b>Completed.</b>	Initial Services Section Manager TDM Supervisor
C. Joint meeting between placement and permanency section supervisors and the placement unit supervisor to start the planning process.	May 2014 <b>Completed – Expansion Workgroup in progress.</b>	Placement & Permanency Section Managers Placement & Permanency Supervisors
D. Ensure that there is a mechanism in place in the existing TDM process to strengthen communication across programs.	<del>July to December 2014</del> <b>July 2015.</b>	All Section Managers TDM Supervisor

E. Clarify and streamline the current TDM process in Court Services as it relates to the placement of youth	July to December 2014 <b>July 2015</b>	Initial Services, Placement & VMCC Section Manager TDM Supervisor Court Services Supervisor ER Court Intake Supervisor Court Services social workers
F. Identify social workers and supervisors to visit/observe TDM in other counties and/or attend an overview training re TDM.	<del>July to December 2014</del> <b>By June 2015.</b>	VMCC, Placement & Permanency Section Managers TDM Supervisor Placement Team Supervisor Placement & Permanency Supervisors
G. TDM facilitators to identify facilitation training opportunities for placement decisions and/or observe placement TDM's in other counties. Include a third facilitator (Placement specialist) to participate in this as well.	<del>July to December 2014</del> <b>By June 2015.</b>	Initial Services & VMCC Section Managers TDM Supervisor TDM Facilitators
H. Collect data re placement change numbers, location, types of placement moves etc.	March to June 2014 <b>Completed.</b>	Placement Section Manager TDM Supervisor Program Analyst
I. Form TDM Workgroup <b>out of TEAM/TDM Steering Committee</b> and set up a time limited schedule of regular monthly meetings. To include social workers, supervisors, managers, and	<del>July to December 2014</del> <b>June 2015.</b>	All Section Managers TDM Supervisor Placement Team Supervisor Placement & Permanency Supervisors

community stakeholders. Issue specific sub committees may also be needed.		Community Stakeholders (group home, other placement providers, foster parent, parent, youth)
J. Utilize UC Davis TA to help with the planning and implementation process	July 2014 to Implementation <b>Completed and ongoing.</b>	Initial Services Section Manager TDM Supervisor UC Davis
K. Design/organize training for all placement section, permanency section, placement unit social workers and supervisors.	<del>January – March 2015</del> <b>March - September 2015</b>	TDM Workgroup FYC Training Coordinator
L. Train staff on new TDM content, policies and procedures.	<del>April – June 2015</del> <b>March - September 2015</b>	TDM Supervisor FYC Training Coordinator
M. Convene a series of community meetings to engage and train a larger group of stakeholders in the implementation of TDM.	June – August 2015	TDM Workgroup
N. Implement TDMs for placement changes identified by the TDM Workgroup	<del>September 2015</del> <b>In stages, fully implemented by December 2015</b>	TDM Workgroup and all associated social workers / supervisors

O. TDM Workgroup <b>reconvenes as necessary</b> then becomes a Steering Committee to identify and develop next steps regarding roll out of TDM to Family Reunification and Exits to Permanency decision making.	October 2015 to December 2018	<b>TEAM</b> /TDM Steering Committee.
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<b>PSYCHOTROPIC MEDICATION – YOUTH WELL-BEING</b>		
<b>Psychotropic Strategy 1:</b> <b>Engage Partners in Conversation of problem, values and objectives to address problem, and create actions/practices to address.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Youth Authorized for Psychotropic Medication</b>  Target: Reduce to 19% or lower the number of Sonoma County dependent youth authorized for psychotropic medication.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Initial conversation with partners (Group Homes, FFAs, Mental Health, Health Services, Children’s Attorneys, County Counsel, Court) regarding values/objectives/alternatives.	April 2014 <b>Completed.</b>	Placement & Permanency Section Managers
B. On-going conversation with partners (Group Homes, FFAs, Mental Health, Health Services, Children’s Attorneys, County Counsel, Court) to continue value/objective/practice discussion.	2014-2017	Placement & Permanency Section Managers

<b>Psychotropic Strategy 2: Develop Internal Review and Monitoring Processes for all Psychotropic Medication Prescriptions</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Youth Authorized for Psychotropic Medication</b>  Target: Reduce by 5% the number of Sonoma County dependent youth authorized for psychotropic medication.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Propose budget funding for a Second-Opinion Psychiatrist to Review all JV-220s, Prescriptions, etc.	June 2014 <b>Funded.</b>	Division Director
B. Hire a Second-Opinion Psychiatrist to Review all JV-220s, Prescriptions, etc.	<del>November 2014</del> <b>April 2015</b>	Division Director
C. Develop a "Treatment Plan" Form that group homes and FFAs must complete and submit with all JV-220, to include, but not limited to: a. Treatment goals b. Behaviors/Mental Health issues to be treated with Medication c. Other treatment methods in tandem with medication (must have others) d. Timeframe Youth expected to take	<del>June 2014</del> <b>February 2015</b>	Placement & Permanency Section Managers with input from Behavioral Health, Public Health Nurses, youth, foster parents, group homes

medication e. Titration Plan f. When/How often prescribing physician will see youth for medication monitoring g. Disclosure to youth re: why taking medication(s), potential side effects, other treatment options, etc.		
D. Develop Quarterly, internal (FY&C) review panel/team meeting to review each psychotropic prescription, progress, goals, etc.	<del>October 2014</del> By June 2015.	Placement & Permanency Section Managers

<b>Psychotropic Strategy 3: Training</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Youth Authorized for Psychotropic Medication</b> Target: Reduce by 5% the number of Sonoma County dependent youth authorized for psychotropic medication.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Train all FY&C Social Workers re: conversing with physicians about medications/prescriptions – simple questions to ask, etc.	Ongoing <del>2014</del> 2015-2017	FYC Managers FYC Training Coordinator

B. Train all FY&C Social Workers re: conversing with youth about medications they're taking, how feeling, if feel medication(s) is/are helping, any side effects, etc.	Ongoing <del>2014</del> 2015-2017	FYC Managers FYC Training Coordinator
C. Continue regular training for FY&C Social Workers and partners – re: psychotropic medications, treatment targets of each, side effects, etc.	Ongoing <del>2014</del> 2015-2017	FYC Managers FYC Training Coordinator

YOUTH SELF-SUFFICIENCY		
Youth Self Sufficiency Strategy 1: Define youth self-sufficiency for transitional age foster youth.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality Assurance; Youth Self-Sufficiency – Measures 8A
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	Target: Complete, accurate data.
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Convene Youth Self Sufficiency Workgroup comprised of permanency planning social workers and youth to create a “profile of success” for a youth who emancipates from foster care.	July 2015	Permanency Section Manager Program Analyst

B. Identify the data elements that correspond to and communicate the “profile of success” including data sources both existing and missing. Address data validity and accessibility.	October 2015	Youth Self Sufficiency Workgroup
C. Conduct feasibility analysis of creating data system to collect identified data.	December 2015	Youth Self Sufficiency Workgroup
D. Create proposal for data collection and tracking system of youth self-sufficiency (well-being) for FYC Management approval.	February 2016	Youth Self Sufficiency Workgroup

<b>Youth Self Sufficiency Strategy 2: Create a data collection system to measure youth self-sufficiency for transitional age foster youth.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality Assurance; Youth Self-Sufficiency – Measures 8A</b>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	Target: Complete, accurate data.
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Change or create policies and procedures to reflect new data collection process.	October 2016	Youth Self Sufficiency Workgroup



B. Create new database, if necessary.	December 2016	Youth Self Sufficiency Workgroup Information Technology (Application Development)
C. Create training plan.	June 2017	Youth Self Sufficiency Workgroup FYC Training Coordinator
D. Provide training to appropriate FYC staff on new data collection policies and procedures.	October 2017	FYC Managers FYC Training Coordinator
E. Create, vet, approve and institutionalize Youth Self Sufficiency reporting system.	December 2017	Program Analyst CWS/CMS Administrative Aide FYC Managers FYC Training Coordinator
F. Create annual Youth Self Sufficiency Community report to inform continuous quality improvement among the department and its community partners serving older foster youth.	January 2018 and annually thereafter	Program Analyst CWS/CMS Administrative Aide FYC Managers

CONSISTENCY OF PRACTICE		
Practice Consistency Strategy 1: Develop and implement a Sonoma County Practice Model.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): Family and community engagement. Target: 65% Stakeholders, including staff, report increased consistency in agency practice, customer service.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Engage in exploratory dialogue about areas of frequent inconsistency and identify the underlying values that may be in conflict.	March 2014	FYC Managers FYC Supervisors
B. Convene a Steering Committee to include co-chairs from both Apollo and Valley of the Moon sites. Create meeting schedule and Project Charter.	April 2014 July 2015	VMCC Program Development Manager VMCC Program Manager Program Analyst
C. Gather information on existing Practice Model frameworks including Safety Organized Practice, California Partners for Permanency, Katie A.	September 2014 Completed.	Practice Model Steering Committee
D. Conduct focus groups to determine most prevalent areas of inconsistency on which to focus.	<del>October 2014 (possibly FYC All Staff Day?)</del> September 2015	Practice Model Steering Committee FYC Managers

E. Select and hire an external facilitator to help develop Sonoma County Practice Model framework.	July 2015	Practice Model Steering Committee
F. Develop Sonoma County Practice Model.	<del>November 2015</del> January 2015	Practice Model Steering Committee
G. Create timeline and training plan for implementation of Sonoma County Practice Model framework.	March 2016	Practice Model Steering Committee
H. Train staff and communicate to external partners on Sonoma County Practice Model.	May 2016	Practice Model Steering Committee FYC Training Coordinator
I. Implement Sonoma County Practice Model.	September 2016	Practice Model Steering Committee FYC Managers
J. Evaluate progress towards implementation of Practice Model. Address gaps in implementation through additional training.	May 2017 and annually thereafter	Practice Model Steering Committee

<b>Practice Consistency Strategy 2: Enhance supervisory consistency.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality assurance; staff satisfaction</b>  Target: 100% of supervisors will have completed the training within 3 years. 65% of staff report increased consistency among supervisors.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Ensure all supervisors attend the Supervisory Effectiveness Training Series I & II.	Ongoing	FYC Managers
B. Create <b>permanent</b> agenda item for FYC Leadership Team biweekly meetings to share best supervisory practices.	January 2014 <b>Completed.</b>	FYC Managers
C. Create permanent agenda item for VMCH quarterly supervisors' meetings to share best supervisory practices.	January 2014 <b>By June 2015.</b>	VMCC Managers
D. Promote culture of teamwork through team building activities, shared vision statements and peer problem-solving. Use biweekly FYC Leadership Team meeting as primary vehicle for these activities.	Ongoing	FYC Managers

E. Use supervision to promote consistent practice and hold staff accountable.	Ongoing	FYC Managers and Supervisors
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<b>Practice Consistency Strategy 3: SDM Case Reading.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality assurance</b> Target: The SDM User Group and each social work unit hold an SDM case reading at least annually.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Create timeline for regular and strategic SDM case readings.	<del>March 2014</del> March 2015	SDM User Group
B. Evaluate utilization/frequency of case readings.	July 2015 <del>December 2014</del> and every six months thereafter	SDM User Group

<b>Practice Consistency Strategy 4: Random case review.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality assurance</b> Target: The SDM User Group and each social work unit hold an SDM case reading at least annually.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Create and implement a case review system for section managers to review	December 2014	Section Managers Program Analyst

randomly selected cases and referrals for compliance and outcomes.		
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DATA COLLECTION AND ENTRY		
<b>Data Strategy 1:</b> <b>Develop data system to track children's mental health and developmental assessments.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality Assurance</b> Target: Complete, accurate data.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
Action Steps:	Timeframe:	Person Responsible:
A. Identify current data collection methods for documenting and tracking children's mental health screenings and assessments.	July 2014	Program Analyst, Community Assessment Providers, Behavioral Health, First 5 Sonoma County
B. Identify and select data fields to be collected across programs.	November 2014	Program Analyst, Community Assessment Providers, Behavioral Health, First 5 Sonoma County
C. Identify and select data system to be used as central warehouse of mental health assessment data (i.e. Persimmony, CWS/CMS)	January 2015	Program Analyst, Community Assessment Providers, Behavioral Health, First 5 Sonoma County

D. Develop policies and procedures and MOUs to support and enforce new data collection system.	June 2015	Program Analyst, Community Assessment Providers, Behavioral Health, First 5 Sonoma County
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<b>Data Strategy 2:</b> <b>Identify best practices to address missing data and issues with data accuracy.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality Assurance</b> Target: Complete, accurate data.
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Convene Data Quality Workgroup, establish meeting schedule.	<del>June 2014</del> <b>April 2015</b>	Program Analyst, CWS/CMS Administrative Aide, Data Quality Workgroup
B. Develop Data Quality Project Charter with work plan outlining all data issues to be resolved by Workgroup.	<del>August 2014</del> <b>June 2015</b>	Data Quality Workgroup
C. Research basis of data issues and best practices in other counties.	<del>June 2015</del> <b>September 2015</b>	Data Quality Workgroup

D. Identify and select changes to data entry process for each data issue included in Charter.	<del>December 2015</del> March 2016	Data Quality Workgroup
E. Develop report of proposed changes to data collection and reporting for FYC Management approval.	<del>March 2016</del> July 2016	Data Quality Workgroup

<b>Data Strategy 3:</b> <b>Develop protocols and systems to correct issues of missing data and inaccurate data.</b>	<input checked="" type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s): Quality Assurance</b> Target: Complete, accurate data.
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Change or create policies and procedures to reflect new data collection process.	October 2016	Data Quality Workgroup
B. Create training plan.	December 2016	Data Quality Workgroup FYC Training Coordinator
C. Provide training to all FYC staff on new data collection policies and procedures.	February 2017	FYC Managers FYC Training Coordinator



PROBATION STRATEGIES		
<b>Probation Strategy 1: Increase monthly contact with custodial and non-custodial parent/guardian for reunification cases.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Reunification Within 12 Months (Measure C1.1)
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
Action Steps:	Timeframe:	Person Responsible:
A. Reduce case load size to 10-15 cases per placement officer by adding an additional placement officer position.	Currently steps are being taken in this direction. Expect to have staff ratio of 1:15 by March 2014.	Division Director
B. Determine baseline and set goals for parent contact based on future data available from CWS/CMS.	Baseline set January 2014- January 2015 Goal set February 2015	Program Analyst Placement Supervisor
C. Create and implement unit procedure for parent contacts.	March 2014	Placement Supervisor
D. Assess performance and address barriers to parent contacts.	March 2015 through February 2019	Division Director Program Analyst Placement Supervisor

<b>Probation Strategy 2: Create and implement a monthly parent education and support group.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Reunification Within 12 Months (Measure C1.1)
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Review best practices in parent support and education for families in the foster care system.	August 2014	Division Director Placement Supervisor Program Analyst
B. Develop quality assurance and outcome measures for the program	September 2014	Division Director Placement Supervisor Program Analyst
B. Identity service providers who provide above mentioned services. Invite them to submit proposals for funding.	January 2015	Division Director Placement Supervisor Program Analyst
C. Award contract	March 2015	Board of Supervisors
D. Begin groups	June 2015	Contracted service provider

E. Monitor outcome and quality assurance measures to determine overall impact of strategy on reunification within 12 months.	June 2015-February 2019	Program Analyst
F. Probation officers will report back to Court during status review hearings on parent attendance and participation as part of compliance with case plan goals.	June 2015 – February 2019	Placement officers Placement Supervisor

<b>Probation Strategy 3: PO conducts assessment of youth/ family to determine level of readiness to transition home.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Reunification Within 12 Months (Measure C1.1)
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Identify post-readiness assessment tool for youth.	August 2014	Program Development and Research Manager
B. Identify and/or create a tool to assess parent's readiness for reunification.	August 2014	Program Development and Research Manager Program Analyst Division Director

		Placement Supervisor
C. Identify and train staff who will implement the tool.	September 2014	Division Director Placement Supervisor
D. Implement a transition team meeting 90 days prior to transition to further assess youth/family's readiness for minor to return home.	October 2014	Division Director Placement Supervisor
E. Placement officers to work collaboratively with group home/treatment team to address any issues as a result of assessment and transition meeting.	October 2014- February 2019	Placement Probation Officers
F. Reassess tool and address barriers to parent cooperation and participation.	October 2014- February 2019	Program Development and Research Manager Program Analyst Division Director Placement Supervisor

<b>Probation Strategy 4: Increase concurrent planning activities for placement youth.</b>	<input checked="" type="checkbox"/> <b>CAPIT</b>	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> Reunification Within 12 Months (Measure C1.1)
	<input type="checkbox"/> <b>CBCAP</b>	
	<input type="checkbox"/> <b>PSSF</b>	
	<input checked="" type="checkbox"/> <b>N/A</b>	
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Develop policy and procedures regarding utilizing family finding services	July 2014	Probation Senior Management Division Director Placement Supervisor
B. Officers to use family finding early on in the case to identify extended family members to establish lifelong connections and provide alternatives to reunification with custodial parent/guardian.	August 2014-February 2019	Placement Officers
C. Officers will establish contact with extended family identified through family finding and engage them throughout the youth's placement.	August 2014-February 2019	Placement Officers
D. Officer will assess the appropriateness of these family members for potential step down from group care should reunification efforts fail with parent/guardian.	August 2014- February 2019	Placement Officers